

ASUW JUDICIAL COMMITTEE ELECTION COMPLAINT

Today's Date _____

Name of Party Making Complaint _____

Address _____

Phone _____ Email _____

Name of Violator _____

Is the Violator: *(check appropriate box)*

- Candidate of the Ballot
- Person(s) campaigning on behalf of a candidate or issue
- Other: *(please explain)* _____

Election Policy Violated _____

Description of Violation *(use back if necessary)* _____

Date of Violation _____ Time of Violation _____

Location of Violation _____

Witness(es) of Violation:

Name	Address	Phone	Email
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____

If complainant fails to appear at the hearing, the complaint will be dismissed. Judicial Committee Hearings for the 2019 ASUW Elections will be held at 6pm on Wednesday, May 22nd in HUB 334.

Signature of Party Making Complaint _____ Date _____ Time _____

Signature of Party Making Complaint _____ Date _____ Time _____

Signature of Judicial Committee Adviser _____ Date _____ Time _____

Office Use Only: Received by _____ Date _____ Complaint Number _____