Campaign Grievance Form

Campaign Name: _____________________________

Time Stamp: ______________________________

All evidence that you would like the ERC to take into consideration when reviewing this grievance must be attached to this form. This form may either be turned in electronically or physically with a time stamp. Any evidence not submitted with this form will not be considered.

<table>
<thead>
<tr>
<th>INFRINGEMENT</th>
<th>TIME</th>
<th>DATE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Location</td>
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**DESCRIPTION (USE ADDITIONAL PAPER IF NECESSARY)**

**STATUTE OR ROP BELIEVED TO BE VIOLATED**

Reported By (Include e-mail address): ___________________________ Date ____________________

Accepted By: ___________________________ Date ____________________

Supervisor of Elections: ___________________________ Date ____________________