

For office use only:	
Board of Election: _____	Date Received: _____
	Time Received: _____

NOTICE OF COMPLAINT

Failure to Disclose on Television or Radio Campaign Advertising

This form is for use by a candidate for an elective office who complied with the television and radio disclosure requirements throughout that candidate's entire campaign.

Plaintiff Information:

Name: _____

Address: _____

Phone: _____

Complaint Filing Date: _____

Has defendant been given notice of complaint (circle one)? Yes / No

If Yes, specify date/time notice was given: _____

If Yes, specify how notice was given: _____

Advertisement Information:

Area Covered (circle one): Statewide / Electoral area

Type of Ad (circle one): Radio / Television

Radio/TV Station: _____

Date/Time Heard/Seen: _____

Sponsor's Name: _____

Description: _____

Plaintiff Signature