CAMPAIGN FINANCE SWORN COMPLAINT

A registered voter in Tennessee may file a sworn complaint alleging that a campaign financial disclosure statement filed regarding an election for which that voter was qualified to vote does not conform to the law or to the truth or that a person has failed to file a statement as required by law (T.C.A. 2-10-108 (c)).

This form should be completed in its entirety, signed and notarized and mailed to: District Attorney General, P.O. Box 178, Hartsville, TN 37074.

Please note: any person who knowingly files a sworn complaint which is false for the purpose of harassment is subject to civil penalties and is liable for reasonable attorney fees incurred by a candidate who was the subject of such complaint (T.C.A. 2-10-108 (d)).

Complaintant

Name_____

Address_____

City_____ State _____ Zip Code _____

Phone _____ Email _____

Complaint

Please provide as much detail as possible in the description of your complaint. Please attach additional pages and any documentation as necessary.

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Signature _____ Date _____

Sworn to and Subscribed before me in the

State of _____

This _____ Day of _____20_____

Notary Seal

_____

Notary Public

_____

Date Commission expires