ELECTION VIOLATION COMPLAINT DOCUMENT

This form must be submitted in person to the official Student Government complaint box in the Student Government Executive Staff Office or over email at sgelections@lsu.edu. The form must be filled out in its entirety. Contact Allyce Trapp, Commissioner of Elections at sgelections@lsu.edu.

TO THE MEMBERS OF THE ELECTION BOARD:

This is a complaint in which the Elections Board has original jurisdiction in accordance with Article VIII, Section 2 of the Louisiana State University Election Code.

Complainant name: ____________________________________________________________
Complainant LSU ID: __________________________________________________________
Complainant LSU Email address: ______________________________________________
Complainant phone number: ____________________________________________________

Respondent(s):

__________________________________________________________________________

Time of alleged violation: Location of alleged violation:

_________________________ ______________________________

Statement of complaint:

__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________
Alleged governing documentation violation(s):

________________________________________________________________________

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________________________________________________________________________

Relief requested (must comply with Article IX, Section 4, § A):

________________________________________________________________________

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________________________________________________________________________

________________________________________________________________________

Signature of Complainant:                                              Date:

________________________________________________________________________  __________________________

*The Complainant is charged with the burden of proving this complaint using a preponderance of the evidence.*

Please e-mail this complaint document to sgelections@lsu.edu after it is completely filled out. No anonymous complaints will be heard. You will be e-mailed a decision once the Election Board has heard the complaint.

For Official Use Only- Do Not Write Below This Line

Date Received:
Filed by:
LSU email address:
Course of action: