This guidance document is advisory in nature but is binding on an agency until amended by such agency. A guidance document does not include internal procedural documents that only affect the internal operations of the agency and does not impose additional requirements or penalties on regulated parties or include confidential information or rules and regulations made in accordance with the Administrative Procedure Act. If you believe that this guidance document imposes additional requirements or penalties on regulated parties, you may request a review of the document.

## State of Nebraska – Help America Vote Act Complaint Form

This form is to be used to file a complaint that the state or a county within Nebraska is not in compliance with the provisions of Title III of the Help America Vote Act. It is not intended for general complaints about the election process. For complaints of a general nature, please contact the Secretary of State at <a href="mailto:sos.elect@nebraska.gov">sos.elect@nebraska.gov</a>.

If you need assistance is completing this form, please call (402) 471-2555 or email sos.elect@nebraska.gov.

Complainan	t Contact Information (*required):
Name*:	
Street Add	ress*:
Phone Nun	nber*: Email (optional):
Person or E	ntity Responsible for HAVA Violation:
Name of pe	erson and/or entity:
Timeframe o	of the HAVA Violation:
•	must be filed within sixty (60) days of the date of the alleged violation or within sixty (60) days of final he federal election at which the alleged violation took place, whichever is later.
Curre	ent or Ongoing
Is Lik	cely to Occur (Approximate date violation will occur:)
Occi	rred Previously (Approximate date violation occurred:)
Description	of Alleged Violation:
	as specific as possible as it assists in investigating the complaint. Please write legibly. Should space be necessary, please add additional sheets as needed.

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-				
Public Hearing:				
You have a right to a public heari conduct the public hearing. You n investigate the complaint. You may to a hearing please refer to the ge	nay also waive the public hearin ay also waive the public hearing	ng in which case the at a later time. For	ne Secretary of Stat	te will
I request a public hear	ing			
I waive the right to a p	ublic hearing			
_				
TATE OF NEBRASKA )				
) s: OUNTY OF)	<b>S.</b>			
(Printed name of <b>complainant</b> app	, beir	ng first duly sworn	, state that the infor	rmation
	st of my knowledge, true and ac	curate.		
IN WITNESS WHEREOF, I h	ave hereunto subscribed my name	thisday	of	,
	(De	iy) (Mo	nth)	(Year)
	Signature of Compla	inant		
Subscribed in my presence ar	nd sworn to before me this	day of		 Year)
	( -3)			rear)
				rear)