



Office of the City Clerk
P.O. Box 1293
Albuquerque, NM 87103
Phone (505) 924-3650 Fax (505) 924-3660
www.cabq.gov/clerk

State of New Mexico)

) s.s.

County of Bernalillo)

COMPLAINT FORM

1. Complainant's Information			
Last Name	First Name		
Mailing Address	City	State	Zip Code
Daytime Phone Number (include area code)	Email Address		

2. Respondent's Information			
Last Name	First Name		
Mailing Address	City	State	Zip Code
Daytime Phone Number (include area code)	Email Address		

3. If Respondent is a Candidate, the office or position sought

4. Has this complaint been filed with any law enforcement agencies? If so, list all agencies and attach copies of all complaints submitted. Additional pages may be attached to this form if the space provided below is not adequate.

5. Describe in reasonable detail the alleged violation(s), including the Section(s) or Part(s) of the Election Code, Code of Ethics, Open and Ethical Elections Code, or Rules and Regulations of the Board of Ethics or City Clerk that you believe were violated, explain how you believe the Election Code, Code of Ethics, Open and Ethical Elections Code, or Rules and Regulations of the Board of Ethics or City Clerk were violated, the date of the alleged violation(s), and include any other pertinent information. Additional pages may be attached to this form if the space provided below is not adequate.

6. Describe the inquiry undertaken regarding the alleged violation. Additional pages may be attached to this form if the space provided below is not adequate.

7. List and attach evidence that supports your allegations, including but not limited to:
 - a. The names/telephone numbers of persons whom you believe may be witnesses to the facts;
 - b. A copy or picture of any political advertisement(s) Complainant references;
 - c. A copy of each document the Complainant references; and
 - d. Any other evidence supporting your allegations.

Additional pages may be attached to this form if the space provided below is not adequate.

I, _____, hereby swear and affirm under penalty of perjury that, to the best of my knowledge, information, and belief, formed after a reasonable inquiry under the circumstances, each factual contention of this Complaint is supported by evidence.

Complainant (Signature)

Print or type name of Complainant

Sworn or affirmed before me, the undersigned authority by _____ this
_____ day of _____ 20__.

Notary Public

If, after a reasonable inquiry under the circumstances, you are unable to certify that certain specifically identified factual contentions of the Complaint are supported by evidence, you may certify as follows:

I, _____, hereby swear and affirm under penalty of perjury that, to the best of my knowledge, information, and belief, there are grounds to conclude that the specifically identified factual contentions of this Complaint are likely to be supported by evidence after a reasonable opportunity for further inquiry

Complainant (Signature)

Print or type name of Complainant

Sworn or affirmed before me, the undersigned authority by _____ this
_____ day of _____ 20__.

Notary Public

All exhibits or attachments referenced in the complaint must be included with the Complaint.