

Madison County Election Board Election Complaint Form

Please submit completed form to the Madison County Election Office via: Email:
voterservices@madisoncounty.in.gov, Mailing address: PO Box 1277, Anderson, IN 46015,
In-Person: 16 E 9th Street, Anderson, IN 46016, or by Fax: 765-640-4203.

Your Information

Date of Complaint: _____
Print Name: _____
Address: _____

Telephone: _____
E-Mail: _____

Complaint Information

Date of Incident: _____
Time of Incident: _____
Location of Incident: _____

Please describe the incident in detail, including which election laws you believe may have been violated:

Please identify all known witnesses and provide names and telephone numbers:

Is this the first time you have raised this concern? _____ Yes _____ No

Do you have any suggestions for resolving this complaint? If so, please explain:

Please provide feedback, additional feedback or comments to consider when investigating your complaint:

Are you a resident of Madison County, Indiana? _____ Yes _____ No

I affirm under the penalties of perjury that the foregoing representations are true to the best of my knowledge and belief.

Signature: _____ Date: _____

Received and forwarded to the Madison County Election Board and County Attorney by:

Signature: _____ Date: _____