



SONOMA COUNTY REGISTRAR OF VOTERS

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Evelyn Mendez
Registrar of Voters

Wendy Hudson
Chief Deputy Registrar of Voters

Election Voter Fraud/Voter Complaint Form

Please type or clearly print all information on this form.

Complainant Information

Name (Last, First Middle) _____

Address _____

City _____ Zip Code _____

Date of Birth _____ Phone Number _____

Email address _____

Details of complaint or incident of voter fraud – provide as much information as possible, including dates, locations and people involved, if known. Attach additional pages, if necessary.

I declare under penalty of perjury that the above information and any attached documentation is a true and accurate depiction of the issue at hand, to the best of my knowledge.

Signature

Date