2004 Voting and Election Day Irregularities Complaint Log Form

EP Volunteer Information		
Name:		
Personal phone number:		
Caller/Voter Contact Information		
First Name: *		
Last Name :*		
Address Line 1:		
Address Line 2:		
City:		
State:		
Zip/Postal Code:		
Phone:		
Ethnicity: Arab-American Asian/Pacific Islander Black Hispanic	Native American/Alaskan Nati White Other Unspecified	ive
Email:		
Details of Problem/Inquiry		
County:		
Date and time of incident:		
Polling Place Location :		
Precinct No:		

Type of Problem:		
Absentee-ballot related prob	olem	Unable to read ballot
Registration-related problem		Insufficient number of ballots
Voter Intimidation		Provisional ballot problem
Machine problem		Other ballot-related problem
Identification-related problem Criminal status-related problem		Late opening
		Early closing
Student status-related proble		Long lines
Non-english lang. assistance		Polling place inquiry
Disability access problem		_ Other polling place problem
		Other
Description of Problem (do not in	clude names):	
Voter Registration Date (or approximation):	Dogistrors' office	Social convice ocenay
Method of Registration:	_Registrars' office _Mail _DMV	Social service agencyThrough voter registration driveOther
Are you voting for the first time?	Yes	No
Names and contact information o	of persons affected a	and/or witnesses:
Action Taken:		
How did you find out about this l	notline?	