

**COMPLAINT FORM**  
**JUDICIAL CAMPAIGN OVERSIGHT COMMITTEE**

Given the time constraints for reviewing complaints which allege campaign conduct violations, it is of the utmost importance that complainants provide evidentiary support for the allegations made in the complaint. Complaints which lack sufficient evidentiary support to allow the Committee to adequately assess whether clear and convincing evidence exists of a violation of one of the canons which falls within the Committee's oversight jurisdiction may be dismissed by the Chair, without further review by the Oversight Committee. (See, Section II, Rules and Operating Procedures, Louisiana Judicial Campaign Oversight Committee).

**PART A. INFORMATION ABOUT YOU - PLEASE KEEP CURRENT**

1. Full Name: \_\_\_\_\_  
Telephone: area code ( \_\_\_\_\_ ) \_\_\_\_\_
2. Home Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_
3. Employer: \_\_\_\_\_  
Work Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Telephone: area code ( \_\_\_\_\_ ) \_\_\_\_\_
4. Name of person who can always reach you: \_\_\_\_\_  
Address & Telephone: \_\_\_\_\_  
\_\_\_\_\_

**PART B. INFORMATION ABOUT THE RESPONDENT CANDIDATE**

1. Name of candidate: \_\_\_\_\_
2. Judgeship race involved: \_\_\_\_\_ Supreme Court  
\_\_\_\_\_ Court of Appeal  
\_\_\_\_\_ District Court  
\_\_\_\_\_ City or Parish Court  
\_\_\_\_\_ Municipal  
\_\_\_\_\_ Family Court  
\_\_\_\_\_ Traffic Court  
\_\_\_\_\_ Unknown
3. Date, time and place where alleged conduct occurred: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**PART C. EXPLANATION OF YOUR COMPLAINT**



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Confidentiality Statement

I hereby acknowledge that complaints are confidential until such time as the respondent candidate is given notice and an opportunity to respond, and the Committee has determined clear and convincing evidence exists that a violation has occurred. My signature below evidences my agreement to maintain the confidentiality of this complaint unless and until such time as a public statement is issued by the Committee.

\_\_\_\_\_  
Date of signing

\_\_\_\_\_  
Complainant signature

\_\_\_\_\_  
Complainant (printed name)

Return this form to: Louisiana Judicial Campaign Oversight Committee  
400 Royal Street, Suite 1190  
New Orleans, LA 70130-8101