This form is being provided in accordance with Section 2, clause VI of the AS Senate Election Code. You are strongly encouraged to try to resolve issues in a professional and calm manner before filing this form. The AS Elections Coordinator is available to offer options, additional information, support in contacting the other party, etc. Please contact the AS Elections Coordinator at as.oce.elections@wwu.edu.

Complainant Name: ________________________________________________________________

Phone number:____________________________ Email: ________________________________

Signature:_________________________________ Date: ___________________________

Grievance Filed Against (name): __________________________________________________

Who is running for the position of: ________________________________________________

Specific Section of Code Violated: ________________________________________________

State the specific violation of the ASWWU Election Code. Give details of when and how the violation was discovered (may attach additional materials):

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Received by Election Board Chair:______________________________________________
Date:______________________________ Time:______________________________