



City of  
**Evanston™**  
OFFICE OF THE CITY CLERK

## Complaint Form

Date: \_\_\_\_\_

Evanston SDMS

Complaint No. \_\_\_\_\_

**[Complaining Party's Name]**

v.

**[Defending Party's Name]**

### **Complaint**

My name is \_\_\_\_\_ . I am a resident of \_\_\_\_\_ .  
I am filing this Complaint against \_\_\_\_\_ pursuant to Section 1-13-5-16B of the Evanston Ordinance creating the Small Donor Matching System for fair Elections. I believe that the Defendant[s] identified in the prior paragraph have violated the Ordinance in the following manners:

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[List all described violations]

