

ADDITIONAL COMPLAINT INFORMATION

Case Number: FEC <case #>

Pursuant to Rule 2B-1.0025, Florida Administrative Code, if you have additional information to correct the ground(s) of legal insufficiency stated in the attached letter, please explain in a concise narrative statement. Attach the statement and any relevant documentation to this form:

STATE OF FLORIDA
COUNTY OF _____

I swear or affirm that the information in the attached statement is true and correct to the best of my knowledge.

Original Signature of Person Bringing Complaint

Sworn to and subscribed before me this _____ day of
_____, 20 ____

Signature of Officer Authorized to Administer Oaths or Notary Public

(Print, Type, or Stamp Commissioned Name of Notary Public)

Personally Known _____ Or Produced Identification _____

Type of Identification Produced _____

Any person who files a complaint while knowing that the allegations are false or without merit commits a misdemeanor of the first degree, punishable as provided in Sections 775.082 and 775.083, Florida Statutes.