

PURPOSE OF FORM: A Member may file an administrative complaint, when granted in law, against a House agency if the Member believes that: (a) their rights were violated in respect to the action(s) the agency took; or (b) the agency makes a ruling in relation to the Member that they wish to appeal. You must file within 180 days after the agency's

| decision.  |                                   |
|--|-----------------------------------|
| Plaintiff Name   | Defendant Name (Agency)           |
| Date the Agency Took Action  |                                   |
| Complaint Facts & Findings (attach if there is additional)   |                                   |
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| Request for Relief (must conform to statutory limits)  |                                   |
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| I attest, subject to penalties of perjury, that the information on this complaint is true, accurate, and complete. |                                   |
| Tallest, subject to penalties of perjury, that the information on this complaint is true, accurate, and complete.  |                                   |
| Plaintiff Signature  | Date TO BE COMPLETED BY THE CLERK |
| DO NOT WRITE BELOW THIS LINE - TO BE COMPLETED BY THE CLERK  |                                   |

Date Received: Date Entered: Case No: