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MAR 23 2020

STATE OF WISCONSIN
ELECTIONS COMMISSION

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COMPLAINT FORM

Please provide the following information about yourself:

Lorraine Luebben

Name

Address 1934 N. Harriman St., Appleton, WI 54911

Address (920) 731-2021

Telephone Number

topcat1027@safe-mail.net

E-mail

State of Wisconsin

Before the Elections Commission

Voter Suppression of In-person Absentee Voting by limiting dates and times under WI Election Law

The Complaint of City of Appleton Unfair Election Restrictions

City of Appleton and Kami Lynch, City Clerk, Complainant(s) against

Respondent, whose

address is 100 N. Appleton St., Appleton, WI

Election Threat 12.09

This complaint is under (Insert the applicable sections of law in chs. 5 to 10 and 12 and other laws relating to elections and election campaigns, other than laws relating to campaign financing)

Lorraine Luebben

I, allege that:

the City of Appleton is putting on unfair restrictions on people who have 8am to 5pm jobs. The new hours are 1-3PM Tues. Mar. 24 and 31; 9-11AM on Thurs. Mar. 26 and Apr. 2. The Voters who have a 12-1pm lunch hour at work cannot vote at City Hall with these restricted hours. I realize that Covid-19 has caused problems for society, but it is no reason to institute undue voting restrictions on people who already have severe challenges because of this pandemic.

the City of Appleton has instituted such restrictive early voting times that it places unfair restrictions on working people. Because of the Covid-19 outbreak, the times are: Tues. Mar. 24 + Mar. 31, 1-3PM and Thurs. Mar. 26 + Apr. 2, 9-11 AM.

For people who work 8-5pm, M-F, it makes early voting impossible or very difficult. There is not even an opportunity for people who have a noon to 1pm lunch hour to vote. The Covid-19 outbreak puts restrictions on every one, but this early voting situation could be corrected very easily with a different early voting schedule.

(Set forth in detail the facts that establish probable cause to believe that a violation has occurred. Be as specific as possible as it relates to dates, times, and individuals involved. Also provide the names of individuals who may have information related to the complaint. Use as many separate pages as needed and attach copies of any supporting documentation.)

March 19, 2020

Date: _____

Lorraine Luebben

Complainant's Signature

I, *Lorraine Luebben*, being first duly sworn, on oath, state that I personally read the above complaint, and that the above allegations are true based on my personal knowledge and, as to those stated on information and belief, I believe them to be true.

Lorraine Luebben

Complainant's Signature

STATE OF WISCONSIN

County of *Dodge*,
(county of notarization)

Sworn to before me this *19* day of

March, 20 *20*.

(Signature of person authorized to administer oaths)

My commission expires _____, or is permanent.

Notary Public or _____
(official title if not notary)

Please send this completed form to:

Mail: Wisconsin Elections Commission
P.O. Box 7984
Madison, WI 53707-7984

Fax: (608) 267-0500

Email: elections@wi.gov