



# The Twentieth Judicial Circuit of Florida Chief Judge's Registry of Expert Witnesses

1700 Monroe Street  
Fort Myers, FL 33901  
Tel. (239) 533-1719  
Fax (239) 533-1796



## COMPLAINT FORM COVER SHEET

Please identify the Expert Witness at issue

Name of person: \_\_\_\_\_

Additional Details (if known):

Business Name: \_\_\_\_\_

Address: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone Number: ( ) \_\_\_\_\_ Cell Phone ( ) \_\_\_\_\_

Please set out on additional pages a detailed statement of the facts and grounds upon which your complaint is based. Common grounds to support the complaint may include:

1. Include information which will apprise the Administrative Office of the Courts of the matter complained of, including:
  - a. the dates involved,
  - b. the number of the case, and/or
  - c. any supporting documents or exhibits
2. Attach a list of names and contact information of any person who can verify the matters upon which your complaint is based.

**Please tell us about yourself** (you may remain anonymous)

Your Name: \_\_\_\_\_  
Last First Middle Initial

Your Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Email Address: \_\_\_\_\_

Phone Number: ( ) \_\_\_\_\_ Cell Phone ( ) \_\_\_\_\_

**Please provide your signature that indicates your assurance that the Attached Statement is True and Accurate to the Best of My Knowledge:**

**Signature** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Submit original to:**  
Office of the Chief Judge  
1700 Monroe Street  
Fort Myers, Florida 33901

**And, Fax or E-mail copy to: Attn: Court Innovations - Fax: (239) 533-1796; E-mail: [efishbeck@ca.cjis20.org](mailto:efishbeck@ca.cjis20.org)**

For use by Twentieth Judicial Circuit:

Date Reviewed: \_\_\_\_\_  
Revised - 7/1/2017

Reviewed  
Resolved