Griffin v. State of Hawaii

Doc. 1

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UNITED STATES DISTRICT COURT

DISTRICT OF HAWAII

JUL 0 2 2020

Pro Se 15 (Rev. 12/16) Complaint for Violation of Civil Rights (Non-Prisoner)

write "see attached" in the space and attach an additional page with the full list of names. Do not include addresses here.)

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UNITED STATES DISTRICT COURT

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fe	or the	
District	of Hawaii	
	Division	
Calvin Christopher Griffin	Case No. C V20 00298 KJ	M
Plaintifis) (Write the full name of each plaintiff who is filing this complaint. If the names of all the plaintiffs cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names.) -V-	Jury Trial: (check one) Yes No	
State Of Hawaii		
Defendant(s) (Write the full name of each defendant who is being sued. If the names of all the defendants cannot fit in the space above, please		

COMPLAINT FOR VIOLATION OF CIVIL RIGHTS

(Non-Prisoner Complaint)

NOTICE

Federal Rules of Civil Procedure 5.2 addresses the privacy and security concerns resulting from public access to electronic court files. Under this rule, papers filed with the court should not contain: an individual's full social security number or full birth date; the full name of a person known to be a minor; or a complete financial account number. A filing may include only: the last four digits of a social security number; the year of an individual's birth; a minor's initials; and the last four digits of a financial account number.

Except as noted in this form, plaintiff need not send exhibits, affidavits, grievance or witness statements, or any other materials to the Clerk's Office with this complaint.

In order for your complaint to be filed, it must be accompanied by the filing fee or an application to proceed in forma pauperis.

Page 1 of 6

I. The Parties to This Complaint

A. The Plaintiff(s)

Provide the information below for each plaintiff named in the complaint. Attach additional pages if needed.

City

Name Address Calvin Christopher Griffin 1154 Fort Street Mall Suite 410

Honolulu

Honolulu

HI State 96813 Zip Code

County

Telephone Number

E-Mail Address

(808) 545-1301 calvingriffin@rocketmail.com

B. The Defendant(s)

Provide the information below for each defendant named in the complaint, whether the defendant is an individual, a government agency, an organization, or a corporation. For an individual defendant, include the person's job or title (if known) and check whether you are bringing this complaint against them in their individual capacity or official capacity, or both. Attach additional pages if needed.

Defendant No. 1			
Name	State of Hawaii		
Job or Title (if known)			
Address			
	City	State	Zip Code
County			
Telephone Number			
E-Mail Address (if known)			
	Individual capacity	Official capacity	
Defendant No. 2			
Name			
Job or Title (if known)			
Address			
	City	State	Zip Code
County			
Telephone Number			
E-Mail Address (if known)			
	Individual capacity	Official capacity	

Pro Se	15 (Rev. 12/	(16) Complaint for Violation of Civil Rights (Non	-Prisoner)		
		Defendant No. 3 Name Job or Title (if known) Address			
		County Telephone Number E-Mail Address (if known)	City	State	Zip Code
			Individual capacity	Official capac	eity
		Defendant No. 4 Name Job or Title (if known) Address			
		County Telephone Number E-Mail Address (if known)	City	State	Zip Code
			Individual capacity	Official capac	eity
II.	Basis	for Jurisdiction			
	immuı Federi	42 U.S.C. § 1983, you may sue state that the secured by the Constitution and al Bureau of Narcotics, 403 U.S. 38 tutional rights.	d [federal laws]." Under Bive	ens v. Six Unknown	Named Agents of
	A.	Are you bringing suit against (check all that apply):			
		Federal officials (a Bivens claim)			
		State or local officials (a § 19	983 claim)		
	В.	Section 1983 allows claims alleging the Constitution and [federal laws federal constitutional or statutory]." 42 U.S.C. § 1983. If you	are suing under sec	tion 1983, what
	C.	Plaintiffs suing under <i>Bivens</i> may are suing under <i>Bivens</i> , what cons officials?			

5 (Rev. 12	
D.	Section 1983 allows defendants to be found liable only when they have acted "under color of any statute, ordinance, regulation, custom, or usage, of any State or Territory or the District of Columbi 42 U.S.C. § 1983. If you are suing under section 1983, explain how each defendant acted under co of state or local law. If you are suing under <i>Bivens</i> , explain how each defendant acted under color federal law. Attach additional pages if needed.
State	ment of Claim
	as briefly as possible the facts of your case. Describe how each defendant was personally involved in
furthe	ases or statutes. If more than one claim is asserted, number each claim and write a short and plain nent of each claim in a separate paragraph. Attach additional pages if needed.
furthe any ca statem	r details such as the names of other persons involved in the events giving rise to your claims. Do not cases or statutes. If more than one claim is asserted, number each claim and write a short and plain
furthe any ca statem	r details such as the names of other persons involved in the events giving rise to your claims. Do not cases or statutes. If more than one claim is asserted, number each claim and write a short and plain nent of each claim in a separate paragraph. Attach additional pages if needed.
furthe any castatem.	r details such as the names of other persons involved in the events giving rise to your claims. Do not do asses or statutes. If more than one claim is asserted, number each claim and write a short and plain nent of each claim in a separate paragraph. Attach additional pages if needed. Where did the events giving rise to your claim(s) occur? What date and approximate time did the events giving rise to your claim(s) occur?
furthe any castatem. A. B.	r details such as the names of other persons involved in the events giving rise to your claims. Do not do asses or statutes. If more than one claim is asserted, number each claim and write a short and plain nent of each claim in a separate paragraph. Attach additional pages if needed. Where did the events giving rise to your claim(s) occur? What date and approximate time did the events giving rise to your claim(s) occur? What are the facts underlying your claim(s)? (For example: What happened to you? Who did who
furthe any castatem. A. B.	r details such as the names of other persons involved in the events giving rise to your claims. Do not cases or statutes. If more than one claim is asserted, number each claim and write a short and plain nent of each claim in a separate paragraph. Attach additional pages if needed. Where did the events giving rise to your claim(s) occur? What date and approximate time did the events giving rise to your claim(s) occur? What are the facts underlying your claim(s)? (For example: What happened to you? Who did what are the facts underlying your claim(s)? (For example: What happened to you? Who did what are the facts underlying your claim(s)?

IV. Injuries

If you sustained injuries related to the events alleged above, describe your injuries and state what medical treatment, if any, you required and did or did not receive.

As a non-partisan candidate for the 15t Congression District, I am requesting a Preliminary Injunction to delay the implementation of the "Mail-In" program that the State of Hawaii is instituting in the upcoming Primary and General Elections. Shortcomings in this voting process as presently proposed will cause irreparable damage by undermining the confidence voters have in this Constitution right that Americans cherish so dearly and so many have made the ultimate sacrifice for.

Additionally, it puts non-traditional political entities at a disadvantage due to the possibility of "ballot harvesting" and other similar practices that have been reported in other locations around the country where this voting process has been put in place. The following are a few examples that I feel are justification for this request:

Chain of Custody: From the information provided by the Elections Office, when the ballots which are official government documents are mailed out through the USPS there is no way to ascertain if the ballot was actually received by the intended voter since there is no requirement for a signature upon receipt. Essentially this important document is subject to interception by unauthorized person(s) or simply disregarded as "junk mail".

-Disabled and Visually Impaired Voters: Individuals with vision problems may have great difficullty in exercising their voting rights since the ballots are not in braille, and if they are assisted then ballot secrecy beomes into play. Individuals with limited physical motor skills that effect the ability to provide a legal signature may also be prevented from participating in the voting process, if they are assisted again the issue of ballot secrecy or manipulation needs to be addressed.

Limited Polling Stations: Initally when it was announced to the voters that "mail-in" voting would be implemented, voters were assured that there would still be voting stations aailable for those who wanted to vote in the tradition way. Later it was announced that the voting stations would be limited, on Oahu only two locations. Decreasing the number of voting stations MAY be in violation of federal guidlines which determine the number of locations that should be available to voters. Many voters who are not confident in the new voting process and want to vote in the traditional way may also have their voting rights denied because there may be limited forms of transportation for them to access the designated voting sites.

Lack of Voter Imput: The legislators took it upon themselves to make his monumental decision to implement "mail-in" voting without adequately allowing voters to express their opinions about this issue which even if not illegal, is against the spirit of the free voting system which we claim to be so proud of.

V. Relief

State briefly what you want the court to do for you. Make no legal arguments. Do not cite any cases or statulif requesting money damages, include the amounts of any actual damages and/or punitive damages claimed the acts alleged. Explain the basis for these claims.

- 1. Only Official ballots used, with ballot accounting required for the number of ballots printed, voted, spoiled and left over.
- 2. Signature required when ballot is sent via USPS to verify sent to correct voter.
- 3. Public comparison of aggregated totals with component parts

VI. Certification and Closing

Under Federal Rule of Civil Procedure 11, by signing below, I certify to the best of my knowledge, information, and belief that this complaint: (1) is not being presented for an improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation; (2) is supported by existing law or by a nonfrivolous argument for extending, modifying, or reversing existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Rule 11.

A. For Parties Without an Attorney

I agree to provide the Clerk's Office with any changes to my address where case—related papers may be served. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

	Date of signing: 2 5	UL 2020	
	Signature of Plaintiff (Printed Name of Plaintiff	Cohr. Dul CALVIN C. GALFFIN	
В.	For Attorneys		
	Date of signing:		
	Signature of Attorney Printed Name of Attorney Bar Number Name of Law Firm Address		
	Telephone Number E-mail Address	State \$08-543-130) 5 N WY (n FFW P N 06 FFTM P)	Zip Code