COMPLAINT TO REPORT A HATCH ACT VIOLATION

For instructions or questions, call the Hatch Act Unit at (202) 804-7002.

* Denotes Required Fields.

IMPORTANT INFORMATION ABOUT FILING A HATCH ACT COMPLAINT WITH THE U.S. OFFICE OF SPECIAL COUNSEL

This form should be used to file complaints alleging violations of the Hatch Act. In order for us to best understand your allegations, we encourage you to fill in all the fields that you can. However, only those fields marked with an asterisk are required. If you fail to fill in a required field, your complaint cannot be processed. When providing information, please be as specific as you can, provide as much detail as possible, and attach/enclose all supporting documentation with your complaint filing. Prior to submitting your complaint to OSC, we recommend you review the information located on our website. If you have any questions about this form, you may phone the Hatch Act Hotline at (202) 804-7002.

CONTACT INFORMATION

Title: Dr.
First Name:* Craig
Middle Initial:
Last Name:* Holman

International Address?: No
Address:*
1473 A Street NE
Washington, DC 20002

Cell Phone Number:
Home Phone Number:
Office Phone Number:
Ext.
Email Address:* cholman@citizen.org

Preferred means of contact:
Email: Yes
Cell Phone Number: Yes
Home Phone Number: No
Office Phone Number: No

Are you referring this complaint on behalf of a government agency? No

Information about referring agency, if applicable.
Agency:
Your Position Title:

REPRESENTATIVE INFORMATION

Do you have representation?* No

Information about representative, if applicable.
First Name:*
Last Name:*
Middle Initial:

International Address?
Address:*

Office Phone Number:
Ext.
Cell Phone Number:
Home Phone Number:
Email Address:*

INFORMATION ABOUT THE INDIVIDUAL WHO ALLEGEDLY VIOLATED THE HATCH ACT (SUBJECT)

Subject's Employment Status:* Federal government employee

Title: Attorney General
Subject's First Name:* Pamela
Subject's Middle Initial:
Subject's Last Name:* Bondi

Position Title: Attorney General

Department:* Justice
Agency:* Other
Agency subcomponent:

Subject's Address:*
950 Pennsylvania Avenue NW
Washington, DC 20530

Office Phone Number: 202-514-2000 **Ext.**
Other Phone Number: **Home Phone Number:**
Email Address:

Is the Hatch Act Subject a Political Appointee?
Yes

Does the Subject have knowledge of the Hatch Act?*
Yes

If yes, please explain why you believe the Subject knows about the Hatch Act (for example: agency training, agency distribution of brochures, flyers, e-mails, prior contact with OSC):
As Attorney General, Pam Bondi would have been trained on the ethics rules that apply to the office.

SUBJECT'S SUPERVISOR'S INFORMATION

Subject's Supervisor's First Name:
Subject's Supervisor's Middle Initial:
Subject's Supervisor's Last Name:
Subject's Supervisor's Title:
Office Telephone: **Ext.**
Other Telephone: **Fax:**
Email Address:

ALLEGED VIOLATION

1. For complaints involving a Subject employed by the federal government, which of the following actions are you alleging?*

Using one's official authority or influence for the purpose of interfering with or affecting the result of an election.
No

Soliciting, accepting, or receiving political contributions.
No

Being a candidate in a partisan election.
No

Soliciting or discouraging the participation in political activity of any person who has business before their employing agency.
No

Engaging in political activity while on duty, in any room or building occupied in the discharge of official duties, while wearing a uniform or official insignia, or while using a vehicle owned or leased by the United States government.
Yes

Taking an active part in political management or political campaigns (This prohibition applies only to further restricted employees. A list of such employees can be found here or at 5 U.S.C. § 7323(b)).
No

2. Please provide a detailed description of the alleged violation(s) and attach/enclose any supporting documentation with your complaint filing. To process your complaint, you must provide as much detailed information as possible. Without sufficient information, we may be unable to investigate your allegation(s).*
A detailed description should include:

a. What the Subject did that allegedly violated the Hatch Act;
b. Where the alleged violation(s) occurred;
c. When the alleged violation(s) took place; and
d. Who else has knowledge that the alleged violation(s) occurred and their relationship to the Subject.

Description of alleged violation:
Overtly partisan banner on the Department of Justice web site. Refthe lects effort by head of the Department of Justice to intimidate employees and to harm solely the Democratic party before the voting public with insinuations. The public banner is attached.

OTHER ACTIONS YOU ARE TAKING?

Please indicate in this section if you have reported your matter through other agencies or organizations. If so, please identify the agency or organization to which you reported the matter and provide the current status. If you have received responses regarding your matter, briefly summarize what results were communicated to you and provide our office with copies of any correspondence.

None.

ATTACHMENTS

Please note that the space available for attachments is limited. Therefore, DO NOT attach every document and email that may be relevant to your claim. You will have an opportunity to make additional submissions at a later date.

I have attached the following documents to my filing:

File Name	File Size (kb)
Department of Justice.docx	13,754

CONSENT TO DISCLOSURE OF INFORMATION

Do you consent to the disclosure of your identify to others outside OSC if it becomes necessary in taking further action on this matter?*

I consent to disclosure of my identity on a need-to-know basis.
Yes

I do not consent to disclosure of my identity. (I understand my lack of consent may prevent OSC from taking further action on my complaint. Even if I do not consent, OSC may disclose my identity if required by law.)
No

CERTIFICATION

I certify that all of the statements made in this complaint are true, complete, and correct to the best of my knowledge and belief. I understand that a false statement or

concealment of a material fact is a criminal offense punishable by a fine, imprisonment, or both. 18 U.S.C. § 1001.*
Yes

BURDEN: The burden for this collection of information (including the time for reviewing instructions, searching existing data sources, gathering the data needed, and completing and reviewing the form) is estimated to be an average of one hour to submit a disclosure of information alleging agency wrongdoing, one hour and fifteen minutes to submit a complaint alleging a prohibited personnel practice or other prohibited activity, or 30 minutes to submit a complaint alleging prohibited political activity. Please send any comments about this burden estimate, and suggestions for reducing the burden, to the U.S. Office of Special Counsel, General Counsel's Office, 1730 M Street, NW, Suite 218, Washington, DC 20036-4505.

This complaint of an alleged Hatch Act violation was received by OSC on: 10/2/2025

PLEASE KEEP A COPY OF YOUR COMPLAINT, ANY SUPPORTING DOCUMENTATION, AND ANY ADDITIONAL ALLEGATIONS THAT YOU SEND TO OSC NOW OR AT ANY TIME WHILE YOUR COMPLAINT IS PENDING.
REPRODUCTION CHARGES UNDER THE FREEDOM OF INFORMATION ACT MAY APPLY TO ANY REQUEST YOU MAKE FOR COPIES OF MATERIALS THAT YOU PROVIDED TO OSC.