

JUDICIAL COUNCIL OF THE ELEVENTH CIRCUIT

COMPLAINT OF JUDICIAL MISCONDUCT OR DISABILITY

MAIL THIS FORM TO THE CLERK, UNITED STATES COURT OF APPEALS, 56 FORSYTH STREET, N.W., ATLANTA, GEORGIA, 30303-2289. MARK THE ENVELOPE "JUDICIAL MISCONDUCT COMPLAINT" OR "JUDICIAL DISABILITY COMPLAINT." DO NOT PUT THE NAME OF THE JUDGE OR MAGISTRATE ON THE ENVELOPE.

SEE RULE 2(e) FOR THE NUMBER OF COPIES REQUIRED

1. Complainant's name: Alberta Davison

Address: P. O. Box 602

Monroeville, AL 36461

Daytime telephone: ( 205 ) 564-2653

2. Judge or magistrate complained about:

Name: Chief Judge Gerald B. Tjoflat

Court: United States Eleventh Circuit Court of Appeals

3. Does this complaint concern the behavior of the judge or magistrate in a particular lawsuit or lawsuits?

( X ) Yes ( ) No

If "yes," give the following information about each lawsuit (use the reverse side if there is more than one):

Court: United States District Court, Middle District of Georgia

Docket number: PCA89-30351

Are (were) you a party or lawyer in the lawsuit?

( X ) Party ( ) Lawyer ( ) Neither

If a party give the name, address, and telephone number of your lawyer:

Name: Simon W. Tache  
1700-06 Race Street

Address: Philadelphia, PA

Alice Cano  
P. O. Box 1419

Santa Rosa Beach, FL 32459

Telephone number: (215)567-4700

(904) 267-1100

Docket number of any appeals to the 11th Circuit: N/A

4. Have you filed any lawsuits against the judge or magistrate?

( ) Yes

(X ) No

If "yes," give the following information about each lawsuit (use the reverse side if there is more than one):

Court:

Docket number:

Present status of suit:

Name, address, and telephone number of your lawyer:

Court to which any appeal has been taken:

Docket number of the appeal:

Present status of appeal:

5. On separate sheets of paper, not larger than the paper this form is printed on, describe the conduct or the evidence of disability that is the subject of this complaint. See rule 2(b) and 2(d). Do not use more than 5 pages (5 sides). Most complaints do not require that much.

6. You should either

(1) check the first box below and sign this form in the presence of a notary public; or

(2) check the second box and sign the form. You do not need a notary public if you check the second box.

(X) I swear (affirm) that --

( ) I declare under penalty of perjury that --

(1) I have read rules 1 and 2 of the Rules of the 11th Circuit Governing Complaints of Judicial Misconduct or Disability, and

(2) The statements made in this complaint are true and correct to the best of my knowledge.

Alberta Davison

(Signature)

Executed on March 9, 1994

(Date)

Sworn and subscribed

to before me March 9, 1994  
(Date)

Elaine P. Brooks

(Notary Public)

My commission expires: Sept 19, 1995