

PUBLIC COUNT CERTIFICATION

20____ General Election

Early Voting – Start Date: ____ / ____ / ____ End Date: ____ / ____ / ____

PEB SERIAL NUMBERS	MASTER or ACTIVATOR	TERMINAL SERIAL NUMBERS	PUBLIC COUNT (OPENING)	PUBLIC COUNT (END OF DAY)

Poll Slip Ends:	Dem: _____	Provisional Ballots:	Dem: _____	Cancelled Ballots:	Dem: _____
	Rep: _____		Rep: _____		Rep: _____
	Non Partisan: _____		Non Partisan: _____		Non Partisan: _____
	Total: _____		Total: _____		Total: _____

Signature of Democrat Representative

Signature of Republican Representative

NOTES:

NOTE: THIS FORM CAN BE USED IN CONJUNCTION WITH THE STATEMENT OF BALLOTS USED.