## PUBLIC COUNT CERTIFICATION

### 20__ Primary Election

Early Voting – Start Date: ___ / ___ / _______  End Date: ___ / ___ / _______

<table>
<thead>
<tr>
<th>PEB SERIAL NUMBERS</th>
<th>MASTER or ACTIVATOR</th>
<th>TERMINAL SERIAL NUMBERS</th>
<th>PUBLIC COUNT (OPENING)</th>
<th>PUBLIC COUNT (END OF DAY)</th>
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**Poll Slip Ends:**  
- **Dem:**  _____  
- **Rep:**  _____  
- **Non Partisan:**  _____  
- **Total:**  _____

**Provisional Ballots:**  
- **Dem:**  _____  
- **Rep:**  _____  
- **Non Partisan:**  _____  
- **Total:**  _____

**Cancelled Ballots:**  
- **Dem:**  _____  
- **Rep:**  _____  
- **Non Partisan:**  _____  
- **Total:**  _____

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Signature of Democrat Representative  

Signature of Republican Representative

**NOTES:**

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