OPTICAL SCAN PROGRAM TESTING AND SECURITY CERTIFICATION

_____ _____

Name of city, township, village or school district County

____Primary_____General____Special____Regular Date of Election: _____

PRELIMINARY ACCURACY TEST (The Preliminary test is the responsibility of the Election Commission. The Election Commission may delegate the administration of the test to an authorized assistant.) The undersigned certifies that the listed precinct tabulators have been tested using the test deck prepared under the direction of the Election Commission, the tabulator results agree with the predetermined test deck results and the official ballots have been compared and agree with the program edit listings. Further the test deck, program predetermined results and the results of the Preliminary Test were secured under the seal listed.

PRECINCT #	TABULATOR #	TEST DATA SEAL #	DATE OF PRELIMINARY TEST

_____/_____ /_____

Member(s) of Election Commission or Authorized Assistant(s)

PUBLIC ACCURACY TEST – We, the Accuracy Board, hereby certify that notice of this test was published 48 hours prior to the conduct of the test and the container holding the testing materials was sealed with the seal recorded on the Preliminary Accuracy Test Certificate. The listed precincts were tested at the Public Accuracy Test using the test deck prepared under the direction of the Election Commission and the results agree with the predetermined results of the test deck. The test deck, program, predetermined results and results of the Public Accuracy Test were secured following the test under the seal listed below.

PRECINCT #	TABULATOR #	TEST DATA SEAL #	DATE OF PRELIMINARY TEST

_____ _____

Member – Accuracy Board/Representative Member – Accuracy Board/Representative

_____

Member – Accuracy Board/Representative