RECOUNT DEPOSIT WORKSHEET

Name of Recount Petitioner:_____
Office Sought: _____
Date of Election:_____

USE THIS SECTION IF ONLY ONE CANDIDATE IS TO BE NOMINATED OR ELECTED

Formula		Enter Data Here	Line
Section I			
Total number of votes cast in this race:			**(A)**
Multiplied by 0.05 (5%)	**X**	0.05	
EQUALS 5% of total votes cast in this race (round up):	**=**		**(B)**
Is **Line B greater than 75**? If **YES**, enter **Line B's** value. If **NO**, enter **75** on **Line C.**			**(C)**
Total votes cast for Winner:			
Minus total votes cast for Petitioner:	**-**		
EQUALS vote differential between Winner and Petitioner:	**=**		**(D)**
Is **Line D greater than Line C**? If **YES**, enter **Line D's** value and **STOP**. The per-precinct deposit of **$250.00** applies. If **NO**, proceed to Section II.			
Section II			
Total number of votes cast in this race: (enter value from **Line A**)			**(E)**
Multiplied by 0.005 (1/2 of 1%)	**X**	0.005	
EQUALS 1/2 of 1% of total votes cast in this race (round up):	**=**		**(F)**
Is **Line F greater than 50**? If **YES**, enter **Line F's** value. If **NO**, enter **50** on **Line G.**			**(G)**
Is **Line D greater than Line G**? If **YES**, enter **Line D's** value and **STOP**. The per-precinct deposit of **$125.00** applies. If **NO**, proceed to **Section III.**			
Section III			
In all other cases, the per-precinct deposit is **$25.00.**			

Recount Deposit Total:	_____	+ _____	=_____	x _____	= _____
	# of ED precincts requested	**# of AVCBs requested**	**Total Number of Precincts**	**Per-Precinct Amount**	**Total Recount Deposit**