Voting System Post-Election Audit Report

County: Manatee
Date of Election: 08/26/2014

Type of Audit (check applicable box): □ Manual □ Automated Independent

Precinct Number(s): __________________________

Race (if Manual Audit): _______________________

1. Overall accuracy of the audit:

2. Description of any problems or discrepancies encountered:

3. Likely cause of such problems or discrepancies:

4. Recommended corrective action with respect to avoiding or mitigating such circumstances in future elections:

Check applicable box and sign below:

□ We hereby certify that the report of the voting system audit performed for the election is accurate and that attached are precinct summary reports for each precinct audited.

□ We hereby certify that a voting system audit was not done because a manual recount was conducted under s. 102.166, Florida Statutes.

Signatures of County Canvassing Board members:

Mark Singer
Printed Name
Signature
Date

Michael Bennett
Printed Name
Signature
Date

Larry Bustle
Printed Name
Signature
Date

Rule 1S-5.026, F.A.C.                           DS-DE 107 (eff. 01/2014)