## Day Before Election Day (if applicable)

## Voting System/Ballot Marking Device

select voting system/ballot marking device select voting system/ballot marking device select voting system/ballot marking device select voting system/ballot marking device

Signed on this date: select a date

Signature of Election Administrator or Designee

Signature of Witness

Signature of Witness (if present)

## **Amount of Machines Tested**

# of machines tested out of # of machines in use # of machines tested out of # of machines in use # of machines tested out of # of machines in use # of machines tested out of # of machines in use

## **Election Day (if applicable)**

Voting System/Ballot Marking Device

ES&S DS200 ES&S DS200 ExpressVote **Amount of Machines Tested** 

1 out of 2 2 out of 2 1 out of 9

In accordance with Montana laws, administrative rules, and testing guidelines, we find that the system(s) is/are performing properly.

Signed on this date: November 5, 2024

Signature of Election Administrator or Designee

Signature of Witness

Signature of Witness (if present)