

**2015 Coordinated Election Post-Election Audit
Jackson County**

Jackson County						
Type	Make / Model	Serial #	Contest Name to Audit	Candidate	Machine Count	Manual/Hand Count
DRE	Hart / eSlate	A0B109	Proposition BB (STATUTORY)	No/Against	-0-	-0-
DRE	Hart / eSlate	A0B109	Proposition BB (STATUTORY)	Yes/For	-0-	-0-
DRE	Hart / eSlate	A0B109	Jackson County Question 1A	Yes/For	-0-	-0-
DRE	Hart / eSlate	A0B109	Jackson County Question 1A	No/Against	-0-	-0-
DRE	Hart / eSlate	A0B109	North Park Hospital District Ballot Question 5A	Yes/For	-0-	-0-
DRE	Hart / eSlate	A0B109	North Park Hospital District Ballot Question 5A	No/Against	-0-	-0-
DRE	Hart / eSlate	A0B109	North Park Conservation District Ballot Question 5B	Yes/For	-0-	-0-
DRE	Hart / eSlate	A0B109	North Park Conservation District Ballot Question 5B	No/Against	-0-	-0-

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NOTE: if there is a complaint or a discrepancy between the manual tallies of each voting device and the corresponding tallies recorded by each voting device Section 1-7-514(2)(c), C.R.S., requires the canvass board and the county clerk and recorder to promptly report to the Secretary of State a description of the audit process used, including any initial, interim, and final results of the completed audit.

Designated Election Official:

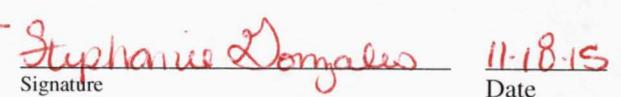
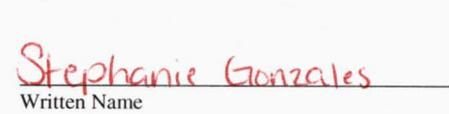
Signature
11-18-15
Date

Written Name

Canvass Board Member:

Signature
11-18-15
Date

Written Name

Canvass Board Member:

Signature
11-18-15
Date

Written Name

Provide additional pages and names as necessary.