

UNIFORM VOTING SYSTEM PILOT ELECTION

IN-PERSON VOTER EVALUATION FORM – BALLOT MARKING DEVICE-DRE

_____ COUNTY, COLORADO

_____ VOTING SYSTEM

Please help Colorado select its next-generation voting system by completing this survey regarding your voting experience today. If you would like assistance in completing this survey, please ask and an election official will be happy to help you.

Instructions: In most instances, you will be asked to “grade” your experience with this voting system by assigning a letter grade of A, B, C, D or F. Each letter grade has the following meaning:

- A** **Excellent or superior**
- B** **Very good**
- C** **Good or acceptable**
- D** **Inferior or not very good**
- F** **Failure; unacceptable**

1. Have you voted on a tablet, touchscreen or laptop voting device before?

Circle one: Yes No

2. Were the written instructions for using the voting device that were posted in your voting booth clear and understandable?

Circle one: A B C D F

3. Were the user instructions and navigation prompts displayed on the voting device itself clear and easy to understand?

Circle one: A B C D F

4. Was it easy to navigate through each page or screen of ballot text on the voting device?

Circle one: A B C D F

VSPC Name: _____

Control Number: _____

5. Was it easy to use the voting device to accurately mark your choices for candidates and ballot measures?

Circle one: A B C D F

6. While using the voting device, did you mistakenly mark a voting choice that you did not intend to make?

Circle one: Yes No

7. If you mistakenly marked an incorrect choice, was it easy to correct your voting choice before printing or casting your ballot? (If you did not mistakenly mark an incorrect voting choice before printing or casting your ballot, please do not answer this question and go directly to Question 8)

Circle one: A B C D F

8. While using the voting device, did you attempt to adjust or change the **contrast** of the device screen?

Circle one: Yes No

9. If you attempted to adjust the contract of the voting device screen, was it easy to do? (If you did not attempt to adjust the contrast of the voting device screen, please do not answer this question and go directly to Question 10.)

Circle one: A B C D F

10. While using the voting device, did you attempt to increase or decrease the **brightness** of the voting device screen?

Circle one: Yes No

11. If you attempted to increase or decrease the brightness of the voting device screen, was it easy to do? (If you did not attempt to adjust the brightness of the voting device screen, please do not answer this question and go to Question 12.)

Circle one: A B C D F

VSPC Name: _____

Control Number: _____

12. While using the voting device, did you attempt to increase or decrease the **font size** (the size of the letters) on the device screen?

Circle one: Yes No

13. If you attempted to adjust the font size on the voting device, was it easy to increase or decrease the **font size** (the size of the letters) on the device screen? (If you did not try to adjust the size of text on the voting device screen, please do not answer this question and go directly to Question 14.)

Circle one: A B C D F

14. While using the voting device, did you listen to the audio recording of the ballot text?

Circle one: Yes No

15. If you listened to the audio recording of the ballot text, was the audio recording clear and understandable? (If you did not listen to the audio recording of the ballot text, please do not answer this question and go directly to Question 18.)

Circle one: A B C D F

16. If you listened to the audio recording of the ballot text, did you try to increase or decrease the volume of the audio ballot? (If you did not listen to the audio recording of the ballot text, please do not answer this question and go directly to Question 18.)

Circle one: Yes No

17. If you listened to and tried to adjust the volume of the audio recording of the ballot text, was it easy to increase or decrease the volume? (If you did not listen to the audio recording of the ballot text or did not try to adjust the volume, please do not answer this question and go directly to Question 18.)

Circle one: A B C D F

18. While using the voting device, did you also use an external accessibility device to mark your ballot, such as a "Sip & Puff" device, navigation arrows, or navigation pedals?

Circle one: Yes No

VSPC Name: _____

Control Number: _____

