

CEB 9 Summary

State of Indiana Summary:

REGISTRATION AND TURNOUT:

1. Number of registered voters in **county** for this election (Note: If the election was held only in part of the county, the number of registered voters in that part of the county for this election): **4738816**
2. Number of voters voting *in person at the polls on Election Day*: **486339**
3. Number of all voters voting *absentee including by mail, travel board, in-person, and military and overseas (UOCAVA)*: **178312**
4. Total number of voters who voted in this election (auto-calculated as #2 + #3): **664651**

ABSENTEE VOTING

5. Please enter the number of absentee ballots that were rejected (exclude UOCAVA): **643**
- 5(a). Please enter the number of absentee ballots Not Received (Not returned to your county by the deadline): **4592**

UOCAVA (Voters using the Federal Postcard Application and Federal Write-In Absentee Ballots)

6. The combined total number of absentee ballots sent by county to military and overseas voters: **595**
7. Total number of ballots in #6 returned by these voters. (Include any Federal Write-In Absentee Ballots, counted, because a UOCAVA did not return an official county ballot.): **461**
8. Total number of ballots in #7 counted: **452**

PROVISIONAL BALLOTS:

9. Total number of provisional ballots counted by county election board: **432**
10. Total number of provisional ballots not counted by county election board: **460**
11. The total number of provisional ballots cast by voters in the county in this election (System calculated as #9 + #10): **892**

CEB 9 Summary

Adams County

REGISTRATION AND TURNOUT:

1. Number of registered voters in **county** for this election (Note: If the election was held only in part of the county, the number of registered voters in that part of the county for this election): **19920**
2. Number of voters voting *in person at the polls on Election Day*: **2920**
3. Number of all voters voting *absentee including by mail, travel board, in-person, and military and overseas (UOCAVA)*: **1234**
4. Total number of voters who voted in this election (auto-calculated as #2 + #3): **4154**

ABSENTEE VOTING

5. Please enter the number of absentee ballots that were rejected (exclude UOCAVA): **2**
- 5(a). Please enter the number of absentee ballots Not Received (Not returned to your county by the deadline): **9**

UOCAVA (Voters using the Federal Postcard Application and Federal Write-In Absentee Ballots)

6. The combined total number of absentee ballots sent by county to military and overseas voters: **0**
7. Total number of ballots in #6 returned by these voters. (Include any Federal Write-In Absentee Ballots, counted, because a UOCAVA did not return an official county ballot.): **0**
8. Total number of ballots in #7 counted: **0**

PROVISIONAL BALLOTS:

9. Total number of provisional ballots counted by county election board: **0**
10. Total number of provisional ballots not counted by county election board: **0**
11. The total number of provisional ballots cast by voters in the county in this election (System calculated as #9 + #10): **0**

ELECTION BUDGET AND EQUIPMENT:

12. BUDGETED cost for this election. Estimate if necessary: **15,000**
- 13(a). Provide the following information for the Election System Type:

| Election System Type | System Service Manufacturer | Voting System Model |
|-------------------------------------|-----------------------------|---------------------|
| Direct Recording Electronic Voting | MicroVote | EMS 4.4 |
| Optical Scan Ballot Tabulator | MicroVote | EMS 4.4 |
| ADA Compliant Ballot Marking Device | MicroVote | EMS 4.4 |
| Election Management System | MicroVote | EMS 4.4 |
| Hand Counted Paper Ballot | YES | |

13(b). Name the System Service Manufacturer used by the County in this Election **MicroVote**

13(c). Describe any discrepancies with your voting system during the election if your County:
none

13(d). Name the Election Pollbook system service provider and the system model used by the county in this election:

| System Service Provider | System Model Number(s) |
|-------------------------|------------------------|
| KNOWiNK LLC | PollPad 2.5.8 |

13(e). Name the EPB System Service Manufacturer used by the County in this Election: **KNOWiNK LLC**

CEB 9 Summary

ENCLOSURES:

14(a). Describe any malfunction or other problem with your voting system during the election. If your county did not experience any problems, please input "None" in the text box below. **none**

14(b). If you will be sending additional information on the malfunctions to IED, how will it be sent? **No Malfunction**

15. How will you be submitting Certified & Final Precinct Level Results for your county to IED? (Please use the Voter Status Counts by Precinct and Split report from SVRS): **Electronic Submission**

16. If you will be sending any additional information to the Election Division, how will it be sent? **Email**

17. Please enter the name, title and mailing address for your county election board members.

| Title | Name | Party Name | Address & Street | City, State, and Zip | E-mail Address | Phone Number |
|---------------------------------------|-----------------|------------|----------------------|--------------------------|---------------------------|--------------|
| Clerk/Secretary of the Election Board | JAMES VOGLEWEDE | Republican | 112 S 2ND ST RM A | DECATUR IN 46733-1618 | jvoglewede@co.adams.in.us | 260-724-5309 |
| Election Board Chairman | WES KUNTZMAN | Republican | 112 S 2ND ST RM A | DECATUR IN 46733-1618 | gwk257@gmail.com | 260-701-0538 |
| Election Board Member | J SWYGART | Democrat | 112 S 2ND ST RM A | DECATUR IN 46733-1618 | jswygart@gmail.com | 260-413-3326 |
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CEB 9 Summary

Allen County

REGISTRATION AND TURNOUT:

1. Number of registered voters in **county** for this election (Note: If the election was held only in part of the county, the number of registered voters in that part of the county for this election): **266933**
2. Number of voters voting *in person at the polls on Election Day*: **25663**
3. Number of all voters voting *absentee including by mail, travel board, in-person, and military and overseas (UOCAVA)*: **8450**
4. Total number of voters who voted in this election (auto-calculated as #2 + #3): **34113**

ABSENTEE VOTING

5. Please enter the number of absentee ballots that were rejected (exclude UOCAVA): **67**
- 5(a). Please enter the number of absentee ballots Not Received (Not returned to your county by the deadline): **234**

UOCAVA (Voters using the Federal Postcard Application and Federal Write-In Absentee Ballots)

6. The combined total number of absentee ballots sent by county to military and overseas voters: **13**
7. Total number of ballots in #6 returned by these voters. (Include any Federal Write-In Absentee Ballots, counted, because a UOCAVA did not return an official county ballot.): **7**
8. Total number of ballots in #7 counted: **7**

PROVISIONAL BALLOTS:

9. Total number of provisional ballots counted by county election board: **8**
10. Total number of provisional ballots not counted by county election board: **25**
11. The total number of provisional ballots cast by voters in the county in this election (System calculated as #9 + #10): **33**

ELECTION BUDGET AND EQUIPMENT:

12. BUDGETED cost for this election. Estimate if necessary: **200,000.00**
- 13(a). Provide the following information for the Election System Type:

| Election System Type | System Service Manufacturer | Voting System Model |
|-------------------------------------|-----------------------------|---------------------|
| Direct Recording Electronic Voting | MicroVote | EMS 4.4 |
| Optical Scan Ballot Tabulator | MicroVote | EMS 4.4 |
| ADA Compliant Ballot Marking Device | MicroVote | EMS 4.4 |
| Election Management System | MicroVote | EMS 4.4 |
| Hand Counted Paper Ballot | NO | |

- 13(b). Name the System Service Manufacturer used by the County in this Election **MicroVote**

- 13(c). Describe any discrepancies with your voting system during the election if your County:

None

- 13(d). Name the Election Pollbook system service provider and the system model used by the county in this election:

| System Service Provider | System Model Number(s) |
|-------------------------|------------------------|
| KNOWiNK LLC | PollPad 2.5.8 |

- 13(e). Name the EPB System Service Manufacturer used by the County in this Election: **MicroVote**

CEB 9 Summary

ENCLOSURES:

14(a). Describe any malfunction or other problem with your voting system during the election. If your county did not experience any problems, please input "None" in the text box below. **None**

14(b). If you will be sending additional information on the malfunctions to IED, how will it be sent? **No Malfunction**

15. How will you be submitting Certified & Final Precinct Level Results for your county to IED? (Please use the Voter Status Counts by Precinct and Split report from SVRS): **Electronic Submission**

16. If you will be sending any additional information to the Election Division, how will it be sent? **Electronic Submission**

17. Please enter the name, title and mailing address for your county election board members.

| Title | Name | Party Name | Address & Street | City, State, and Zip | E-mail Address | Phone Number |
|---------------------------------------|-------------------------|------------|------------------|----------------------|--------------------------------------|--------------|
| Clerk/Secretary of the Election Board | CHRISTOPHER M NANCARROW | Republican | 1 E MAIN ST | FORT WAYNE IN 46802 | christopher.nancarrow@allencounty.us | 260-449-4816 |
| Election Board Chairman | DANIEL P KENSINGER | Republican | 1 E MAIN ST | FORT WAYNE IN 46802 | dkensinger@shineandhardin.com | 260-745-1970 |
| Election Board Member | JACK E MORRIS | Democratic | 1 E MAIN ST | FORT WAYNE IN 46802 | bpmjl1983@gmail.com | 260-417-6177 |
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CEB 9 Summary

Bartholomew County

REGISTRATION AND TURNOUT:

1. Number of registered voters in **county** for this election (Note: If the election was held only in part of the county, the number of registered voters in that part of the county for this election): **52736**
2. Number of voters voting *in person at the polls on Election Day*: **5439**
3. Number of all voters voting *absentee including by mail, travel board, in-person, and military and overseas (UOCAVA)*: **3366**
4. Total number of voters who voted in this election (auto-calculated as #2 + #3): **8805**

ABSENTEE VOTING

5. Please enter the number of absentee ballots that were rejected (exclude UOCAVA): **14**
- 5(a). Please enter the number of absentee ballots Not Received (Not returned to your county by the deadline): **115**

UOCAVA (Voters using the Federal Postcard Application and Federal Write-In Absentee Ballots)

6. The combined total number of absentee ballots sent by county to military and overseas voters: **10**
7. Total number of ballots in #6 returned by these voters. (Include any Federal Write-In Absentee Ballots, counted, because a UOCAVA did not return an official county ballot.): **7**
8. Total number of ballots in #7 counted: **7**

PROVISIONAL BALLOTS:

9. Total number of provisional ballots counted by county election board: **3**
10. Total number of provisional ballots not counted by county election board: **0**
11. The total number of provisional ballots cast by voters in the county in this election (System calculated as #9 + #10): **3**

ELECTION BUDGET AND EQUIPMENT:

12. BUDGETED cost for this election. Estimate if necessary: **60,000**
- 13(a). Provide the following information for the Election System Type:

| Election System Type | System Service Manufacturer | Voting System Model |
|-------------------------------------|-----------------------------|---------------------|
| Direct Recording Electronic Voting | MicroVote | EMS 4.4 |
| Optical Scan Ballot Tabulator | MicroVote | EMS 4.4 |
| ADA Compliant Ballot Marking Device | MicroVote | EMS 4.4 |
| Election Management System | MicroVote | EMS 4.4 |
| Hand Counted Paper Ballot | NO | |

- 13(b). Name the System Service Manufacturer used by the County in this Election **MicroVote**

- 13(c). Describe any discrepancies with your voting system during the election if your County:
None

- 13(d). Name the Election Pollbook system service provider and the system model used by the county in this election:

| System Service Provider | System Model Number(s) |
|-------------------------|------------------------|
| KNOWiNK LLC | PollPad 2.3.7 |

- 13(e). Name the EPB System Service Manufacturer used by the County in this Election: **KNOWiNK LLC**

CEB 9 Summary

ENCLOSURES:

14(a). Describe any malfunction or other problem with your voting system during the election. If your county did not experience any problems, please input "None" in the text box below. **None**

14(b). If you will be sending additional information on the malfunctions to IED, how will it be sent? **No Malfunction**

15. How will you be submitting Certified & Final Precinct Level Results for your county to IED? (Please use the Voter Status Counts by Precinct and Split report from SVRS): **Electronic Submission**

16. If you will be sending any additional information to the Election Division, how will it be sent? **Electronic Submission**

17. Please enter the name, title and mailing address for your county election board members.

| Title | Name | Party Name | Address & Street | City, State, and Zip | E-mail Address | Phone Number |
|---------------------------------------|---------------|------------|------------------|------------------------|--------------------------------|--------------|
| Election Board Chairman | JAMES HOLLAND | REPUBLICAN | P O BOX 924 | COLUMBUS IN 47202-0924 | shari.lentz@bartholomew.in.gov | 812-379-1604 |
| Election Board Member | MARK KEVITT | DEMOCRATIC | P O BOX 924 | COLUMBUS IN 47202-0924 | shari.lentz@bartholomew.in.gov | 812-379-1604 |
| Clerk/Secretary of the Election Board | SHARI LENTZ | REPUBLICAN | P O BOX 924 | COLUMBUS IN 47202-0924 | shari.lentz@bartholomew.in.gov | 812-379-1604 |
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CEB 9 Summary

Benton County

REGISTRATION AND TURNOUT:

1. Number of registered voters in **county** for this election (Note: If the election was held only in part of the county, the number of registered voters in that part of the county for this election): **6036**
2. Number of voters voting *in person at the polls on Election Day*: **1560**
3. Number of all voters voting *absentee including by mail, travel board, in-person, and military and overseas (UOCAVA)*: **418**
4. Total number of voters who voted in this election (auto-calculated as #2 + #3): **1978**

ABSENTEE VOTING

5. Please enter the number of absentee ballots that were rejected (exclude UOCAVA): **0**
- 5(a). Please enter the number of absentee ballots Not Received (Not returned to your county by the deadline): **7**

UOCAVA (Voters using the Federal Postcard Application and Federal Write-In Absentee Ballots)

6. The combined total number of absentee ballots sent by county to military and overseas voters: **1**
7. Total number of ballots in #6 returned by these voters. (Include any Federal Write-In Absentee Ballots, counted, because a UOCAVA did not return an official county ballot.): **1**
8. Total number of ballots in #7 counted: **1**

PROVISIONAL BALLOTS:

9. Total number of provisional ballots counted by county election board: **0**
10. Total number of provisional ballots not counted by county election board: **0**
11. The total number of provisional ballots cast by voters in the county in this election (System calculated as #9 + #10): **0**

ELECTION BUDGET AND EQUIPMENT:

12. BUDGETED cost for this election. Estimate if necessary: **37,450**
- 13(a). Provide the following information for the Election System Type:

| Election System Type | System Service Manufacturer | Voting System Model |
|-------------------------------------|-----------------------------|---------------------|
| Direct Recording Electronic Voting | N/A | N/A |
| Optical Scan Ballot Tabulator | Hart InterCivic | Verity 2.5 |
| ADA Compliant Ballot Marking Device | Hart InterCivic | Verity 2.5 |
| Election Management System | Hart InterCivic | Verity 2.5 |
| Hand Counted Paper Ballot | NO | |

- 13(b). Name the System Service Manufacturer used by the County in this Election **GBS**

- 13(c). Describe any discrepancies with your voting system during the election if your County:

None

- 13(d). Name the Election Pollbook system service provider and the system model used by the county in this election:

| System Service Provider | System Model Number(s) |
|-------------------------|------------------------|
| KNOWiNK LLC | PollPad 3.0.1 |

- 13(e). Name the EPB System Service Manufacturer used by the County in this Election: **GBS**

CEB 9 Summary

ENCLOSURES:

14(a). Describe any malfunction or other problem with your voting system during the election. If your county did not experience any problems, please input "None" in the text box below. **None**

14(b). If you will be sending additional information on the malfunctions to IED, how will it be sent? **No Malfunction**

15. How will you be submitting Certified & Final Precinct Level Results for your county to IED? (Please use the Voter Status Counts by Precinct and Split report from SVRS): **Electronic Submission**

16. If you will be sending any additional information to the Election Division, how will it be sent? **Email**

17. Please enter the name, title and mailing address for your county election board members.

| Title | Name | Party Name | Address & Street | City, State, and Zip | E-mail Address | Phone Number |
|---------------------------------------|----------------|------------|---------------------|----------------------|---------------------------|--------------|
| Clerk/Secretary of the Election Board | NATALIE J KIDD | Republican | 706 E. 5TH ST., #37 | FOWLER IN 47944 | nkidd@bentoncounty.in.gov | 7658840930 |
| Election Board Chairman | HANNE COX | Republican | 706 E. 5TH ST., #37 | FOWLER IN 47944 | nkidd@bentoncounty.in.gov | 7653667064 |
| Election Board Member | MIKE BREWER | Democratic | 706 E. 5TH ST., #37 | FOWLER IN 47944 | nkidd@bentoncounty.in.gov | 7653636300 |
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CEB 9 Summary

Blackford County

REGISTRATION AND TURNOUT:

1. Number of registered voters in **county** for this election (Note: If the election was held only in part of the county, the number of registered voters in that part of the county for this election): **8182**
2. Number of voters voting *in person at the polls on Election Day*: **1130**
3. Number of all voters voting *absentee including by mail, travel board, in-person, and military and overseas (UOCAVA)*: **530**
4. Total number of voters who voted in this election (auto-calculated as #2 + #3): **1660**

ABSENTEE VOTING

5. Please enter the number of absentee ballots that were rejected (exclude UOCAVA): **0**
- 5(a). Please enter the number of absentee ballots Not Received (Not returned to your county by the deadline): **6**

UOCAVA (Voters using the Federal Postcard Application and Federal Write-In Absentee Ballots)

6. The combined total number of absentee ballots sent by county to military and overseas voters: **0**
7. Total number of ballots in #6 returned by these voters. (Include any Federal Write-In Absentee Ballots, counted, because a UOCAVA did not return an official county ballot.): **0**
8. Total number of ballots in #7 counted: **0**

PROVISIONAL BALLOTS:

9. Total number of provisional ballots counted by county election board: **28**
10. Total number of provisional ballots not counted by county election board: **6**
11. The total number of provisional ballots cast by voters in the county in this election (System calculated as #9 + #10): **34**

ELECTION BUDGET AND EQUIPMENT:

12. BUDGETED cost for this election. Estimate if necessary: **19,500.00**
- 13(a). Provide the following information for the Election System Type:

| Election System Type | System Service Manufacturer | Voting System Model |
|-------------------------------------|-----------------------------|---------------------|
| Direct Recording Electronic Voting | MicroVote | EMS 4.4 |
| Optical Scan Ballot Tabulator | MicroVote | EMS 4.4 |
| ADA Compliant Ballot Marking Device | MicroVote | EMS 4.4 |
| Election Management System | MicroVote | EMS 4.4 |
| Hand Counted Paper Ballot | NO | |

- 13(b). Name the System Service Manufacturer used by the County in this Election **MicroVote**

- 13(c). Describe any discrepancies with your voting system during the election if your County:
None

- 13(d). Name the Election Pollbook system service provider and the system model used by the county in this election:

| System Service Provider | System Model Number(s) |
|-------------------------|------------------------|
| KNOWiNK LLC | PollPad 2.5 |

- 13(e). Name the EPB System Service Manufacturer used by the County in this Election: **KNOWiNK LLC**

CEB 9 Summary

ENCLOSURES:

14(a). Describe any malfunction or other problem with your voting system during the election. If your county did not experience any problems, please input "None" in the text box below. **None**

14(b). If you will be sending additional information on the malfunctions to IED, how will it be sent? **USPS or Courier**

15. How will you be submitting Certified & Final Precinct Level Results for your county to IED? (Please use the Voter Status Counts by Precinct and Split report from SVRS): **USPS or Courier**

16. If you will be sending any additional information to the Election Division, how will it be sent? **Email**

17. Please enter the name, title and mailing address for your county election board members.

| Title | Name | Party Name | Address & Street | City, State, and Zip | E-mail Address | Phone Number |
|---------------------------------------|------------------|------------|----------------------|------------------------------|-------------------------------|--------------|
| Election Board Chairman | ANDREW DUDELSTON | Republican | 110 W WASHINGTON ST. | HARTFORD CITY IN 47348 -2295 | andy.dudelston@gmail.com | 7653460830 |
| Election Board Member | DERINDA SHADY | Democratic | 110 W WASHINGTON ST. | HARTFORD CITY IN 47348 -2295 | dshady53@gmail.com | 7654992908 |
| Clerk/Secretary of the Election Board | KIMBERLY PITTS | Republican | 110 W WASHINGTON ST. | HARTFORD CITY IN 47348 -2295 | kpitts@blackfordcounty.in.gov | 7653481130 |
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CEB 9 Summary

Boone County

REGISTRATION AND TURNOUT:

1. Number of registered voters in **county** for this election (Note: If the election was held only in part of the county, the number of registered voters in that part of the county for this election): **55587**
2. Number of voters voting *in person at the polls on Election Day*: **6715**
3. Number of all voters voting *absentee including by mail, travel board, in-person, and military and overseas (UOCAVA)*: **3048**
4. Total number of voters who voted in this election (auto-calculated as #2 + #3): **9763**

ABSENTEE VOTING

5. Please enter the number of absentee ballots that were rejected (exclude UOCAVA): **7**
- 5(a). Please enter the number of absentee ballots Not Received (Not returned to your county by the deadline): **0**

UOCAVA (Voters using the Federal Postcard Application and Federal Write-In Absentee Ballots)

6. The combined total number of absentee ballots sent by county to military and overseas voters: **8**
7. Total number of ballots in #6 returned by these voters. (Include any Federal Write-In Absentee Ballots, counted, because a UOCAVA did not return an official county ballot.): **6**
8. Total number of ballots in #7 counted: **6**

PROVISIONAL BALLOTS:

9. Total number of provisional ballots counted by county election board: **0**
10. Total number of provisional ballots not counted by county election board: **3**
11. The total number of provisional ballots cast by voters in the county in this election (System calculated as #9 + #10): **3**

ELECTION BUDGET AND EQUIPMENT:

12. BUDGETED cost for this election. Estimate if necessary: **55,000**
- 13(a). Provide the following information for the Election System Type:

| Election System Type | System Service Manufacturer | Voting System Model |
|-------------------------------------|-----------------------------|---------------------|
| Direct Recording Electronic Voting | MicroVote | EMS 4.4 |
| Optical Scan Ballot Tabulator | MicroVote | EMS 4.4 |
| ADA Compliant Ballot Marking Device | MicroVote | EMS 4.4 |
| Election Management System | MicroVote | EMS 4.4 |
| Hand Counted Paper Ballot | NO | |

- 13(b). Name the System Service Manufacturer used by the County in this Election **MicroVote**

- 13(c). Describe any discrepancies with your voting system during the election if your County:
none

- 13(d). Name the Election Pollbook system service provider and the system model used by the county in this election:

| System Service Provider | System Model Number(s) |
|-------------------------|------------------------|
| KNOWiNK LLC | PollPad 2.5.8 |

- 13(e). Name the EPB System Service Manufacturer used by the County in this Election: **KNOWiNK LLC**

CEB 9 Summary

ENCLOSURES:

14(a). Describe any malfunction or other problem with your voting system during the election. If your county did not experience any problems, please input "None" in the text box below. **none**

14(b). If you will be sending additional information on the malfunctions to IED, how will it be sent? **No Malfunction**

15. How will you be submitting Certified & Final Precinct Level Results for your county to IED? (Please use the Voter Status Counts by Precinct and Split report from SVRS): **Email**

16. If you will be sending any additional information to the Election Division, how will it be sent? **Email**

17. Please enter the name, title and mailing address for your county election board members.

| Title | Name | Party Name | Address & Street | City, State, and Zip | E-mail Address | Phone Number |
|---------------------------------------|--------------------|------------|-----------------------|----------------------|------------------------|--------------|
| Clerk/Secretary of the Election Board | JESSICA J FOUTS | Republican | 212 COURTHOUSE SQUARE | LEBANON IN 46052 | jfouts@co.boone.in.us | 7654823510 |
| Election Board Chairman | REBECCA S. MCCLURE | Republican | 212 COURTHOUSE SQUARE | LEBANON IN 46052 | becky@mymetronet.net | 7654823510 |
| Election Board Member | BRIAN JONES | republican | 212 COURTHOUSE SQUARE | LEBANON IN 46052 | brianjones74@gmail.com | 7654823510 |
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CEB 9 Summary

Brown County

REGISTRATION AND TURNOUT:

1. Number of registered voters in **county** for this election (Note: If the election was held only in part of the county, the number of registered voters in that part of the county for this election): **12782**
2. Number of voters voting *in person at the polls on Election Day*: **3155**
3. Number of all voters voting *absentee including by mail, travel board, in-person, and military and overseas (UOCAVA)*: **828**
4. Total number of voters who voted in this election (auto-calculated as #2 + #3): **3983**

ABSENTEE VOTING

5. Please enter the number of absentee ballots that were rejected (exclude UOCAVA): **0**
- 5(a). Please enter the number of absentee ballots Not Received (Not returned to your county by the deadline): **10**

UOCAVA (Voters using the Federal Postcard Application and Federal Write-In Absentee Ballots)

6. The combined total number of absentee ballots sent by county to military and overseas voters: **4**
7. Total number of ballots in #6 returned by these voters. (Include any Federal Write-In Absentee Ballots, counted, because a UOCAVA did not return an official county ballot.): **4**
8. Total number of ballots in #7 counted: **2**

PROVISIONAL BALLOTS:

9. Total number of provisional ballots counted by county election board: **8**
10. Total number of provisional ballots not counted by county election board: **16**
11. The total number of provisional ballots cast by voters in the county in this election (System calculated as #9 + #10): **24**

ELECTION BUDGET AND EQUIPMENT:

12. BUDGETED cost for this election. Estimate if necessary: **24,000.00**
- 13(a). Provide the following information for the Election System Type:

| Election System Type | System Service Manufacturer | Voting System Model |
|-------------------------------------|-----------------------------|---------------------|
| Direct Recording Electronic Voting | Unisyn | OpenElect 2.2 |
| Optical Scan Ballot Tabulator | Unisyn | OpenElect 2.0A |
| ADA Compliant Ballot Marking Device | Unisyn | OpenElect 2.0A |
| Election Management System | Unisyn | OpenElect 2.2 |
| Hand Counted Paper Ballot | NO | |

- 13(b). Name the System Service Manufacturer used by the County in this Election **RBM**

- 13(c). Describe any discrepancies with your voting system during the election if your County:

None

- 13(d). Name the Election Pollbook system service provider and the system model used by the county in this election:

| System Service Provider | System Model Number(s) |
|-------------------------|------------------------|
| VR Systems | EVid 2.2 |

- 13(e). Name the EPB System Service Manufacturer used by the County in this Election: **VR Systems**

CEB 9 Summary

ENCLOSURES:

14(a). Describe any malfunction or other problem with your voting system during the election. If your county did not experience any problems, please input "None" in the text box below. **None**

14(b). If you will be sending additional information on the malfunctions to IED, how will it be sent? **No Malfunction**

15. How will you be submitting Certified & Final Precinct Level Results for your county to IED? (Please use the Voter Status Counts by Precinct and Split report from SVRS): **Electronic Submission**

16. If you will be sending any additional information to the Election Division, how will it be sent? **Electronic Submission**

17. Please enter the name, title and mailing address for your county election board members.

| Title | Name | Party Name | Address & Street | City, State, and Zip | E-mail Address | Phone Number |
|---------------------------------------|---------------|------------|------------------|----------------------|---------------------------|--------------|
| Election Board Member | KEVIN FLEMING | Democratic | PO BOX 85 | NASHVILLE IN 47448 | kgfleming@att.net | 3174357091 |
| Election Board Chairman | MARK WILLIAMS | Republican | PO BOX 85 | NASHVILLE IN 47448 | miw.williamslaw@gmail.com | 8644308045 |
| Clerk/Secretary of the Election Board | KATHY SMITH | Republican | PO BOX 85 | NASHVILLE IN 47448 | smithk@browncounty-in.us | 8129885510 |
| | | | | | | |
| | | | | | | |

CEB 9 Summary

Carroll County

REGISTRATION AND TURNOUT:

1. Number of registered voters in **county** for this election (Note: If the election was held only in part of the county, the number of registered voters in that part of the county for this election): **14174**
2. Number of voters voting *in person at the polls on Election Day*: **1927**
3. Number of all voters voting *absentee including by mail, travel board, in-person, and military and overseas (UOCAVA)*: **841**
4. Total number of voters who voted in this election (auto-calculated as #2 + #3): **2768**

ABSENTEE VOTING

5. Please enter the number of absentee ballots that were rejected (exclude UOCAVA): **0**
- 5(a). Please enter the number of absentee ballots Not Received (Not returned to your county by the deadline): **9**

UOCAVA (Voters using the Federal Postcard Application and Federal Write-In Absentee Ballots)

6. The combined total number of absentee ballots sent by county to military and overseas voters: **3**
7. Total number of ballots in #6 returned by these voters. (Include any Federal Write-In Absentee Ballots, counted, because a UOCAVA did not return an official county ballot.): **3**
8. Total number of ballots in #7 counted: **3**

PROVISIONAL BALLOTS:

9. Total number of provisional ballots counted by county election board: **5**
10. Total number of provisional ballots not counted by county election board: **4**
11. The total number of provisional ballots cast by voters in the county in this election (System calculated as #9 + #10): **9**

ELECTION BUDGET AND EQUIPMENT:

12. BUDGETED cost for this election. Estimate if necessary: **44,000.00**
- 13(a). Provide the following information for the Election System Type:

| Election System Type | System Service Manufacturer | Voting System Model |
|-------------------------------------|-----------------------------|---------------------|
| Direct Recording Electronic Voting | N/A | N/A |
| Optical Scan Ballot Tabulator | ES&S | EVS 5.2.0.0 |
| ADA Compliant Ballot Marking Device | ES&S | EVS 5.2.0.0 |
| Election Management System | ES&S | EVS 5.2.0.0 |
| Hand Counted Paper Ballot | NO | |

- 13(b). Name the System Service Manufacturer used by the County in this Election **ES&S**

- 13(c). Describe any discrepancies with your voting system during the election if your County:

NONE

- 13(d). Name the Election Pollbook system service provider and the system model used by the county in this election:

| System Service Provider | System Model Number(s) |
|-------------------------|------------------------|
| ES&S | EZRoster 3.7.0.0 |

- 13(e). Name the EPB System Service Manufacturer used by the County in this Election: **ES&S**

CEB 9 Summary

ENCLOSURES:

14(a). Describe any malfunction or other problem with your voting system during the election. If your county did not experience any problems, please input "None" in the text box below.

One Precinct from the 2020 Primary was not archived correctly which resulted in 8 provisional ballots being issued until our onsite support person could fix the issue.

14(b). If you will be sending additional information on the malfunctions to IED, how will it be sent? **Email**

15. How will you be submitting Certified & Final Precinct Level Results for your county to IED? (Please use the Voter Status Counts by Precinct and Split report from SVRS): **Electronic Submission**

16. If you will be sending any additional information to the Election Division, how will it be sent? **Email**

17. Please enter the name, title and mailing address for your county election board members.

| Title | Name | Party Name | Address & Street | City, State, and Zip | E-mail Address | Phone Number |
|---------------------------------------|------------------|------------|--------------------------|----------------------|-----------------------------|--------------|
| Clerk/Secretary of the Election Board | SHARON E MILBURN | Republican | 101 W. MAIN ST. STE. 207 | DELPHI IN 46923 | ccclerk@carrollcountyin.gov | 7655644485 |
| Election Board Chairman | ANDREW SANDORA | Republican | 101 W. MAIN ST. STE. 207 | DELPHI IN 46923 | asandora@sandoratech.com | 7655646795 |
| Election Board Member | SANDRA CRIPE | Democratic | 101 W. MAIN ST. STE. 207 | DELPHI IN 46923 | vscr@ffni.com | 7655646795 |
| | | | | | | |
| | | | | | | |

CEB 9 Summary

Cass County

REGISTRATION AND TURNOUT:

1. Number of registered voters in **county** for this election (Note: If the election was held only in part of the county, the number of registered voters in that part of the county for this election): **22472**
2. Number of voters voting *in person at the polls on Election Day*: **1638**
3. Number of all voters voting *absentee including by mail, travel board, in-person, and military and overseas (UOCAVA)*: **1528**
4. Total number of voters who voted in this election (auto-calculated as #2 + #3): **3166**

ABSENTEE VOTING

5. Please enter the number of absentee ballots that were rejected (exclude UOCAVA): **0**
- 5(a). Please enter the number of absentee ballots Not Received (Not returned to your county by the deadline): **12**

UOCAVA (Voters using the Federal Postcard Application and Federal Write-In Absentee Ballots)

6. The combined total number of absentee ballots sent by county to military and overseas voters: **1**
7. Total number of ballots in #6 returned by these voters. (Include any Federal Write-In Absentee Ballots, counted, because a UOCAVA did not return an official county ballot.): **0**
8. Total number of ballots in #7 counted: **0**

PROVISIONAL BALLOTS:

9. Total number of provisional ballots counted by county election board: **8**
10. Total number of provisional ballots not counted by county election board: **0**
11. The total number of provisional ballots cast by voters in the county in this election (System calculated as #9 + #10): **8**

ELECTION BUDGET AND EQUIPMENT:

12. BUDGETED cost for this election. Estimate if necessary: **65,000**
- 13(a). Provide the following information for the Election System Type:

| Election System Type | System Service Manufacturer | Voting System Model |
|-------------------------------------|-----------------------------|---------------------|
| Direct Recording Electronic Voting | Hart InterCivic | HVS 6.2.2 |
| Optical Scan Ballot Tabulator | Hart InterCivic | HVS 6.2.2 |
| ADA Compliant Ballot Marking Device | Hart InterCivic | HVS 6.2.2 |
| Election Management System | Hart InterCivic | HVS 6.2.2 |
| Hand Counted Paper Ballot | NO | |

13(b). Name the System Service Manufacturer used by the County in this Election **Hart InterCivic**

13(c). Describe any discrepancies with your voting system during the election if your County:
none

13(d). Name the Election Pollbook system service provider and the system model used by the county in this election:

| System Service Provider | System Model Number(s) |
|-------------------------|------------------------|
| VR Systems | EVid Next 1.9.104 |

13(e). Name the EPB System Service Manufacturer used by the County in this Election: **VR Systems**

CEB 9 Summary

ENCLOSURES:

14(a). Describe any malfunction or other problem with your voting system during the election. If your county did not experience any problems, please input "None" in the text box below. **none**

14(b). If you will be sending additional information on the malfunctions to IED, how will it be sent? **USPS or Courier**

15. How will you be submitting Certified & Final Precinct Level Results for your county to IED? (Please use the Voter Status Counts by Precinct and Split report from SVRS): **Electronic Submission**

16. If you will be sending any additional information to the Election Division, how will it be sent? **USPS or Courier**

17. Please enter the name, title and mailing address for your county election board members.

| Title | Name | Party Name | Address & Street | City, State, and Zip | E-mail Address | Phone Number |
|---------------------------------------|-------------------|------------|-------------------------|--------------------------|-----------------------------------|--------------|
| Clerk/Secretary of the Election Board | DESTRY R RICHEY | Republican | 200 COURT PARK | LOGANSPO RT IN 46947- | destry.richey@co.cass.in. us | 5747532194 |
| Election Board Member | ANDREW STEPHENSON | Republican | 200 COURT PARK | LOGANSPO RT IN 46947- | andrew@michaelandstep henson | 5747534107 |
| Election Board Member | JAMES AUSTEN | Democrat | 200 COURT PARK ROOM 407 | LOGANSPO RT IN 46947 | james.herman.austen@g mail.com | 5746018400 |
| | | | | | | |
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CEB 9 Summary

Clark County

REGISTRATION AND TURNOUT:

1. Number of registered voters in **county** for this election (Note: If the election was held only in part of the county, the number of registered voters in that part of the county for this election): **97641**
2. Number of voters voting *in person at the polls on Election Day*: **9116**
3. Number of all voters voting *absentee including by mail, travel board, in-person, and military and overseas (UOCAVA)*: **1404**
4. Total number of voters who voted in this election (auto-calculated as #2 + #3): **10520**

ABSENTEE VOTING

5. Please enter the number of absentee ballots that were rejected (exclude UOCAVA): **0**
- 5(a). Please enter the number of absentee ballots Not Received (Not returned to your county by the deadline): **77**

UOCAVA (Voters using the Federal Postcard Application and Federal Write-In Absentee Ballots)

6. The combined total number of absentee ballots sent by county to military and overseas voters: **3**
7. Total number of ballots in #6 returned by these voters. (Include any Federal Write-In Absentee Ballots, counted, because a UOCAVA did not return an official county ballot.): **3**
8. Total number of ballots in #7 counted: **3**

PROVISIONAL BALLOTS:

9. Total number of provisional ballots counted by county election board: **4**
10. Total number of provisional ballots not counted by county election board: **8**
11. The total number of provisional ballots cast by voters in the county in this election (System calculated as #9 + #10): **12**

ELECTION BUDGET AND EQUIPMENT:

12. BUDGETED cost for this election. Estimate if necessary: **100,000.00**
- 13(a). Provide the following information for the Election System Type:

| Election System Type | System Service Manufacturer | Voting System Model |
|-------------------------------------|-----------------------------|---------------------|
| Direct Recording Electronic Voting | ES&S | Unity 3.4.1.0 |
| Optical Scan Ballot Tabulator | ES&S | Unity 3.4.1.0 |
| ADA Compliant Ballot Marking Device | N/A | N/A |
| Election Management System | N/A | N/A |
| Hand Counted Paper Ballot | NO | |

- 13(b). Name the System Service Manufacturer used by the County in this Election **ES&S**

- 13(c). Describe any discrepancies with your voting system during the election if your County:
none

- 13(d). Name the Election Pollbook system service provider and the system model used by the county in this election:

| System Service Provider | System Model Number(s) |
|-------------------------|------------------------|
| KNOWiNK LLC | PollPad 3.0.1 |

- 13(e). Name the EPB System Service Manufacturer used by the County in this Election: **KNOWiNK LLC**

CEB 9 Summary

ENCLOSURES:

14(a). Describe any malfunction or other problem with your voting system during the election. If your county did not experience any problems, please input "None" in the text box below. **none**

14(b). If you will be sending additional information on the malfunctions to IED, how will it be sent? **No Malfunction**

15. How will you be submitting Certified & Final Precinct Level Results for your county to IED? (Please use the Voter Status Counts by Precinct and Split report from SVRS): **Electronic Submission**

16. If you will be sending any additional information to the Election Division, how will it be sent? **Email**

17. Please enter the name, title and mailing address for your county election board members.

| Title | Name | Party Name | Address & Street | City, State, and Zip | E-mail Address | Phone Number |
|---------------------------------------|---------------|------------|----------------------------|-------------------------|-----------------------|--------------|
| Clerk/Secretary of the Election Board | SUSAN POPP | Democratic | 501 E. COURT AVE, ROOM 139 | JEFFERSONVILLE IN 47130 | spopp@co.clark.in.us | 5027243490 |
| Election Board Chairman | ANDREW STEELE | Democratic | 501 E. COURT AVE, ROOM 139 | JEFFERSONVILLE IN 47130 | ASTEEL@CO.CLARK.IN.US | 5028191950 |
| Election Board Member | MARK GRUBE | Republican | 501 E. COURT AVE, ROOM 139 | JEFFERSONVILLE IN 47130 | markgrube84@gmail.com | 5027185356 |
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CEB 9 Summary

Clay County

REGISTRATION AND TURNOUT:

1. Number of registered voters in **county** for this election (Note: If the election was held only in part of the county, the number of registered voters in that part of the county for this election): **18721**
2. Number of voters voting *in person at the polls on Election Day*: **3320**
3. Number of all voters voting *absentee including by mail, travel board, in-person, and military and overseas (UOCAVA)*: **934**
4. Total number of voters who voted in this election (auto-calculated as #2 + #3): **4254**

ABSENTEE VOTING

5. Please enter the number of absentee ballots that were rejected (exclude UOCAVA): **5**
- 5(a). Please enter the number of absentee ballots Not Received (Not returned to your county by the deadline): **7**

UOCAVA (Voters using the Federal Postcard Application and Federal Write-In Absentee Ballots)

6. The combined total number of absentee ballots sent by county to military and overseas voters: **4**
7. Total number of ballots in #6 returned by these voters. (Include any Federal Write-In Absentee Ballots, counted, because a UOCAVA did not return an official county ballot.): **4**
8. Total number of ballots in #7 counted: **4**

PROVISIONAL BALLOTS:

9. Total number of provisional ballots counted by county election board: **0**
10. Total number of provisional ballots not counted by county election board: **0**
11. The total number of provisional ballots cast by voters in the county in this election (System calculated as #9 + #10): **0**

ELECTION BUDGET AND EQUIPMENT:

12. BUDGETED cost for this election. Estimate if necessary: **92,000.00**
- 13(a). Provide the following information for the Election System Type:

| Election System Type | System Service Manufacturer | Voting System Model |
|-------------------------------------|-----------------------------|---------------------|
| Direct Recording Electronic Voting | MicroVote | EMS 4.4 |
| Optical Scan Ballot Tabulator | MicroVote | EMS 4.4 |
| ADA Compliant Ballot Marking Device | MicroVote | EMS 4.4 |
| Election Management System | MicroVote | EMS 4.4 |
| Hand Counted Paper Ballot | NO | |

- 13(b). Name the System Service Manufacturer used by the County in this Election **MicroVote**

- 13(c). Describe any discrepancies with your voting system during the election if your County:
2 panels with screen issues

- 13(d). Name the Election Pollbook system service provider and the system model used by the county in this election:

| System Service Provider | System Model Number(s) |
|-------------------------|------------------------|
| KNOWiNK LLC | PollPad 2.5.8 |

- 13(e). Name the EPB System Service Manufacturer used by the County in this Election: **KNOWiNK LLC**

CEB 9 Summary

ENCLOSURES:

14(a). Describe any malfunction or other problem with your voting system during the election. If your county did not experience any problems, please input "None" in the text box below. **None**

14(b). If you will be sending additional information on the malfunctions to IED, how will it be sent? **No Malfunction**

15. How will you be submitting Certified & Final Precinct Level Results for your county to IED? (Please use the Voter Status Counts by Precinct and Split report from SVRS): **Email**

16. If you will be sending any additional information to the Election Division, how will it be sent? **Email**

17. Please enter the name, title and mailing address for your county election board members.

| Title | Name | Party Name | Address & Street | City, State, and Zip | E-mail Address | Phone Number |
|---------------------------------------|-----------------|------------|---------------------------|----------------------|-----------------------------|--------------|
| Clerk/Secretary of the Election Board | AMY JORDAN | Republican | 609 E NATIONAL AV, RM 211 | BRAZIL IN 47834 | amy.jordan@claycountyin.gov | 8124489025 |
| Election Board Chairman | EVELYN BROWN | Democratic | 609 E NATIONAL AV, RM 211 | BRAZIL IN 47834 | evelynbrown2307@gmail.com | 8122432995 |
| Election Board Member | SARAH FRODERMAN | Republican | 609 E NATIONAL AV, RM 211 | BRAZIL IN 47834 | SARAH.FRODERMAN@GMAIL.COM | 3172926628 |
| | | | | | | |
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CEB 9 Summary

Clinton County

REGISTRATION AND TURNOUT:

1. Number of registered voters in **county** for this election (Note: If the election was held only in part of the county, the number of registered voters in that part of the county for this election): **20257**
2. Number of voters voting *in person at the polls on Election Day*: **3015**
3. Number of all voters voting *absentee including by mail, travel board, in-person, and military and overseas (UOCAVA)*: **1423**
4. Total number of voters who voted in this election (auto-calculated as #2 + #3): **4438**

ABSENTEE VOTING

5. Please enter the number of absentee ballots that were rejected (exclude UOCAVA): **12**
- 5(a). Please enter the number of absentee ballots Not Received (Not returned to your county by the deadline): **25**

UOCAVA (Voters using the Federal Postcard Application and Federal Write-In Absentee Ballots)

6. The combined total number of absentee ballots sent by county to military and overseas voters: **3**
7. Total number of ballots in #6 returned by these voters. (Include any Federal Write-In Absentee Ballots, counted, because a UOCAVA did not return an official county ballot.): **2**
8. Total number of ballots in #7 counted: **2**

PROVISIONAL BALLOTS:

9. Total number of provisional ballots counted by county election board: **1**
10. Total number of provisional ballots not counted by county election board: **11**
11. The total number of provisional ballots cast by voters in the county in this election (System calculated as #9 + #10): **12**

ELECTION BUDGET AND EQUIPMENT:

12. BUDGETED cost for this election. Estimate if necessary: **57,553.59**
- 13(a). Provide the following information for the Election System Type:

| Election System Type | System Service Manufacturer | Voting System Model |
|-------------------------------------|-----------------------------|---------------------|
| Direct Recording Electronic Voting | MicroVote | EMS 4.4 |
| Optical Scan Ballot Tabulator | MicroVote | EMS 4.4 |
| ADA Compliant Ballot Marking Device | MicroVote | EMS 4.4 |
| Election Management System | MicroVote | EMS 4.4 |
| Hand Counted Paper Ballot | NO | |

- 13(b). Name the System Service Manufacturer used by the County in this Election **MicroVote**

- 13(c). Describe any discrepancies with your voting system during the election if your County:

None

- 13(d). Name the Election Pollbook system service provider and the system model used by the county in this election:

| System Service Provider | System Model Number(s) |
|-------------------------|------------------------|
| KNOWiNK LLC | PollPad 2.5.8 |

- 13(e). Name the EPB System Service Manufacturer used by the County in this Election: **KNOWiNK LLC**

CEB 9 Summary

ENCLOSURES:

14(a). Describe any malfunction or other problem with your voting system during the election. If your county did not experience any problems, please input "None" in the text box below. **None**

14(b). If you will be sending additional information on the malfunctions to IED, how will it be sent? **No Malfunction**

15. How will you be submitting Certified & Final Precinct Level Results for your county to IED? (Please use the Voter Status Counts by Precinct and Split report from SVRS): **Electronic Submission**

16. If you will be sending any additional information to the Election Division, how will it be sent? **Electronic Submission**

17. Please enter the name, title and mailing address for your county election board members.

| Title | Name | Party Name | Address & Street | City, State, and Zip | E-mail Address | Phone Number |
|---------------------------------------|----------------------|------------|-----------------------|----------------------|------------------------|--------------|
| Clerk/Secretary of the Election Board | RHEA A HARRIS | Republican | 265 COURTHOUSE SQUARE | FRANKFORT IN 46041 | rcopas@clintonco.com | 7656596335 |
| Election Board Chairman | ALICIA ALBERTSON | Republican | 265 COURTHOUSE SQUARE | FRANKFORT IN 46041 | aalbertson@rmctlaw.com | 7656544438 |
| Election Board Member | MARGARET A ALEXANDER | Democratic | 265 COURTHOUSE SQUARE | FRANKFORT IN 46041 | bhard58@yahoo.com | 7656591231 |
| | | | | | | |
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CEB 9 Summary

Crawford County

REGISTRATION AND TURNOUT:

1. Number of registered voters in **county** for this election (Note: If the election was held only in part of the county, the number of registered voters in that part of the county for this election): **7503**
2. Number of voters voting *in person at the polls on Election Day*: **1684**
3. Number of all voters voting *absentee including by mail, travel board, in-person, and military and overseas (UOCAVA)*: **285**
4. Total number of voters who voted in this election (auto-calculated as #2 + #3): **1969**

ABSENTEE VOTING

5. Please enter the number of absentee ballots that were rejected (exclude UOCAVA): **0**
- 5(a). Please enter the number of absentee ballots Not Received (Not returned to your county by the deadline): **0**

UOCAVA (Voters using the Federal Postcard Application and Federal Write-In Absentee Ballots)

6. The combined total number of absentee ballots sent by county to military and overseas voters: **0**
7. Total number of ballots in #6 returned by these voters. (Include any Federal Write-In Absentee Ballots, counted, because a UOCAVA did not return an official county ballot.): **0**
8. Total number of ballots in #7 counted: **0**

PROVISIONAL BALLOTS:

9. Total number of provisional ballots counted by county election board: **2**
10. Total number of provisional ballots not counted by county election board: **5**
11. The total number of provisional ballots cast by voters in the county in this election (System calculated as #9 + #10): **7**

ELECTION BUDGET AND EQUIPMENT:

12. BUDGETED cost for this election. Estimate if necessary: **30,000.00**
- 13(a). Provide the following information for the Election System Type:

| Election System Type | System Service Manufacturer | Voting System Model |
|-------------------------------------|-----------------------------|---------------------|
| Direct Recording Electronic Voting | ES&S | Unity 3.0.1.0 |
| Optical Scan Ballot Tabulator | ES&S | Unity 3.0.1.0 |
| ADA Compliant Ballot Marking Device | ES&S | Unity 3.0.1.0 |
| Election Management System | ES&S | Unity 3.0.1.0 |
| Hand Counted Paper Ballot | NO | |

13(b). Name the System Service Manufacturer used by the County in this Election **N/A**

13(c). Describe any discrepancies with your voting system during the election if your County:

NONE

13(d). Name the Election Pollbook system service provider and the system model used by the county in this election:

Not Using Electronic Pollbook

| System Service Provider | System Model Number(s) |
|-------------------------------|------------------------|
| Not Using Electronic Pollbook | |

CEB 9 Summary

13(e). Name the EPB System Service Manufacturer used by the County in this Election: **N/A**

ENCLOSURES:

14(a). Describe any malfunction or other problem with your voting system during the election. If your county did not experience any problems, please input "None" in the text box below. **NONE**

14(b). If you will be sending additional information on the malfunctions to IED, how will it be sent? **No Malfunction**

15. How will you be submitting Certified & Final Precinct Level Results for your county to IED? (Please use the Voter Status Counts by Precinct and Split report from SVRS): **Electronic Submission**

16. If you will be sending any additional information to the Election Division, how will it be sent? **Electronic Submission**

17. Please enter the name, title and mailing address for your county election board members.

| Title | Name | Party Name | Address & Street | City, State, and Zip | E-mail Address | Phone Number |
|---------------------------------------|--------------|------------|--------------------------|----------------------|-----------------------------------|--------------|
| Election Board Member | LISA LANNING | DEMOCRAT | 715 JUDICIAL PLAZA DRIVE | ENGLISH IN 47118 | LLANNING@CRAWFORDCOUNTYIN.COM | 8123382565 |
| Clerk/Secretary of the Election Board | LISA HOLZBOG | REPUBLICAN | 715 JUDICIAL PLAZA DRIVE | ENGLISH IN 47118 | clerkholzbog@crawfordcountyin.com | 8123382565 |
| Election Board Chairman | CARL DRAPER | DEMOCRAT | 715 JUDICIAL PLAZA DRIVE | ENGLISH IN 47118 | CDRAPER@CRAWFORDCOUNTYIN.COM | 8123382565 |
| | | | | | | |
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CEB 9 Summary

Daviess County

REGISTRATION AND TURNOUT:

1. Number of registered voters in **county** for this election (Note: If the election was held only in part of the county, the number of registered voters in that part of the county for this election): **17814**
2. Number of voters voting *in person at the polls on Election Day*: **1282**
3. Number of all voters voting *absentee including by mail, travel board, in-person, and military and overseas (UOCAVA)*: **407**
4. Total number of voters who voted in this election (auto-calculated as #2 + #3): **1689**

ABSENTEE VOTING

5. Please enter the number of absentee ballots that were rejected (exclude UOCAVA): **1**
- 5(a). Please enter the number of absentee ballots Not Received (Not returned to your county by the deadline): **24**

UOCAVA (Voters using the Federal Postcard Application and Federal Write-In Absentee Ballots)

6. The combined total number of absentee ballots sent by county to military and overseas voters: **0**
7. Total number of ballots in #6 returned by these voters. (Include any Federal Write-In Absentee Ballots, counted, because a UOCAVA did not return an official county ballot.): **0**
8. Total number of ballots in #7 counted: **0**

PROVISIONAL BALLOTS:

9. Total number of provisional ballots counted by county election board: **0**
10. Total number of provisional ballots not counted by county election board: **0**
11. The total number of provisional ballots cast by voters in the county in this election (System calculated as #9 + #10): **0**

ELECTION BUDGET AND EQUIPMENT:

12. BUDGETED cost for this election. Estimate if necessary: **36,705.96**
- 13(a). Provide the following information for the Election System Type:

| Election System Type | System Service Manufacturer | Voting System Model |
|-------------------------------------|-----------------------------|---------------------|
| Direct Recording Electronic Voting | MicroVote | EMS 4.4 |
| Optical Scan Ballot Tabulator | MicroVote | EMS 4.4 |
| ADA Compliant Ballot Marking Device | MicroVote | EMS 4.4 |
| Election Management System | MicroVote | EMS 4.4 |
| Hand Counted Paper Ballot | NO | |

13(b). Name the System Service Manufacturer used by the County in this Election **MicroVote**

13(c). Describe any discrepancies with your voting system during the election if your County:

None

13(d). Name the Election Pollbook system service provider and the system model used by the county in this election:

| System Service Provider | System Model Number(s) |
|-------------------------|------------------------|
| KNOWiNK LLC | PollPad 3.0.1 |

13(e). Name the EPB System Service Manufacturer used by the County in this Election: **KNOWiNK LLC**

CEB 9 Summary

ENCLOSURES:

14(a). Describe any malfunction or other problem with your voting system during the election. If your county did not experience any problems, please input "None" in the text box below. **None**

14(b). If you will be sending additional information on the malfunctions to IED, how will it be sent? **No Malfunction**

15. How will you be submitting Certified & Final Precinct Level Results for your county to IED? (Please use the Voter Status Counts by Precinct and Split report from SVRS): **Electronic Submission**

16. If you will be sending any additional information to the Election Division, how will it be sent? **Email**

17. Please enter the name, title and mailing address for your county election board members.

| Title | Name | Party Name | Address & Street | City, State, and Zip | E-mail Address | Phone Number |
|---------------------------------------|--------------------|------------|----------------------------|----------------------|-----------------------------|--------------|
| Clerk/Secretary of the Election Board | JANICE M. WILLIAMS | Republican | DAVIESS COUNTY COURT HOUSE | WASHINGTON IN 47501 | janice.williams@daviess.org | 8122548679 |
| Election Board Chairman | MARTHA NEWTON | Republican | DAVIESS COUNTY COURT HOUSE | WASHINGTON IN 47501 | bestest-mom@hotmail.com | 8124866583 |
| Election Board Member | REBECCA S. GUTHRIE | Democrat | DAVIESS COUNTY COURT HOUSE | WASHINGTON IN 47501 | Becksfamily@hotmail.com | 8122574278 |
| | | | | | | |
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CEB 9 Summary

Dearborn County

REGISTRATION AND TURNOUT:

1. Number of registered voters in **county** for this election (Note: If the election was held only in part of the county, the number of registered voters in that part of the county for this election): **39403**
2. Number of voters voting *in person at the polls on Election Day*: **2937**
3. Number of all voters voting *absentee including by mail, travel board, in-person, and military and overseas (UOCAVA)*: **455**
4. Total number of voters who voted in this election (auto-calculated as #2 + #3): **3392**

ABSENTEE VOTING

5. Please enter the number of absentee ballots that were rejected (exclude UOCAVA): **0**
- 5(a). Please enter the number of absentee ballots Not Received (Not returned to your county by the deadline): **16**

UOCAVA (Voters using the Federal Postcard Application and Federal Write-In Absentee Ballots)

6. The combined total number of absentee ballots sent by county to military and overseas voters: **6**
7. Total number of ballots in #6 returned by these voters. (Include any Federal Write-In Absentee Ballots, counted, because a UOCAVA did not return an official county ballot.): **2**
8. Total number of ballots in #7 counted: **1**

PROVISIONAL BALLOTS:

9. Total number of provisional ballots counted by county election board: **3**
10. Total number of provisional ballots not counted by county election board: **0**
11. The total number of provisional ballots cast by voters in the county in this election (System calculated as #9 + #10): **3**

ELECTION BUDGET AND EQUIPMENT:

12. BUDGETED cost for this election. Estimate if necessary: **83,000**
- 13(a). Provide the following information for the Election System Type:

| Election System Type | System Service Manufacturer | Voting System Model |
|-------------------------------------|-----------------------------|---------------------|
| Direct Recording Electronic Voting | ES&S | EVS 5.2.4.0 |
| Optical Scan Ballot Tabulator | ES&S | EVS 5.2.4.0 |
| ADA Compliant Ballot Marking Device | ES&S | EVS 5.2.4.0 |
| Election Management System | ES&S | EVS 5.2.4.0 |
| Hand Counted Paper Ballot | NO | |

- 13(b). Name the System Service Manufacturer used by the County in this Election **ES&S**

- 13(c). Describe any discrepancies with your voting system during the election if your County:
None

- 13(d). Name the Election Pollbook system service provider and the system model used by the county in this election:

| System Service Provider | System Model Number(s) |
|-------------------------|------------------------|
| ES&S | ExpressPoll 3.2.2.1 |

- 13(e). Name the EPB System Service Manufacturer used by the County in this Election: **ES&S**

CEB 9 Summary

ENCLOSURES:

14(a). Describe any malfunction or other problem with your voting system during the election. If your county did not experience any problems, please input "None" in the text box below. **None**

14(b). If you will be sending additional information on the malfunctions to IED, how will it be sent? **No Malfunction**

15. How will you be submitting Certified & Final Precinct Level Results for your county to IED? (Please use the Voter Status Counts by Precinct and Split report from SVRS): **Fax**

16. If you will be sending any additional information to the Election Division, how will it be sent? **Fax**

17. Please enter the name, title and mailing address for your county election board members.

| Title | Name | Party Name | Address & Street | City, State, and Zip | E-mail Address | Phone Number |
|---------------------------------------|------------------|------------|------------------|-----------------------|----------------|--------------|
| Clerk/Secretary of the Election Board | GAYLE PENNINGTON | Republican | 165 MARY STREET | LAWRENCEBURG IN 47025 | n/a | 8125378867 |
| Election Board Chairman | FRANK KRAMER | Republican | 165 MARY STREET | LAWRENCEBURG IN 47025 | n/a | 8125378867 |
| Election Board Member | LESLIE VOTAW | Democratic | 165 MARY STREET | LAWRENCEBURG IN 47025 | n/a | 8125378867 |
| | | | | | | |
| | | | | | | |

CEB 9 Summary

Decatur County

REGISTRATION AND TURNOUT:

1. Number of registered voters in **county** for this election (Note: If the election was held only in part of the county, the number of registered voters in that part of the county for this election): **17059**
2. Number of voters voting *in person at the polls on Election Day*: **3120**
3. Number of all voters voting *absentee including by mail, travel board, in-person, and military and overseas (UOCAVA)*: **812**
4. Total number of voters who voted in this election (auto-calculated as #2 + #3): **3932**

ABSENTEE VOTING

5. Please enter the number of absentee ballots that were rejected (exclude UOCAVA): **1**
- 5(a). Please enter the number of absentee ballots Not Received (Not returned to your county by the deadline): **8**

UOCAVA (Voters using the Federal Postcard Application and Federal Write-In Absentee Ballots)

6. The combined total number of absentee ballots sent by county to military and overseas voters: **1**
7. Total number of ballots in #6 returned by these voters. (Include any Federal Write-In Absentee Ballots, counted, because a UOCAVA did not return an official county ballot.): **1**
8. Total number of ballots in #7 counted: **1**

PROVISIONAL BALLOTS:

9. Total number of provisional ballots counted by county election board: **7**
10. Total number of provisional ballots not counted by county election board: **0**
11. The total number of provisional ballots cast by voters in the county in this election (System calculated as #9 + #10): **7**

ELECTION BUDGET AND EQUIPMENT:

12. BUDGETED cost for this election. Estimate if necessary: **70,212.5**
- 13(a). Provide the following information for the Election System Type:

| Election System Type | System Service Manufacturer | Voting System Model |
|-------------------------------------|-----------------------------|---------------------|
| Direct Recording Electronic Voting | MicroVote | EMS 4.4 |
| Optical Scan Ballot Tabulator | MicroVote | EMS 4.4 |
| ADA Compliant Ballot Marking Device | MicroVote | EMS 4.4 |
| Election Management System | MicroVote | EMS 4.4 |
| Hand Counted Paper Ballot | NO | |

- 13(b). Name the System Service Manufacturer used by the County in this Election **MicroVote**

- 13(c). Describe any discrepancies with your voting system during the election if your County:

None

- 13(d). Name the Election Pollbook system service provider and the system model used by the county in this election:

| System Service Provider | System Model Number(s) |
|-------------------------|------------------------|
| KNOWiNK LLC | PollPad 3.0.1 |

- 13(e). Name the EPB System Service Manufacturer used by the County in this Election: **KNOWiNK LLC**

CEB 9 Summary

ENCLOSURES:

14(a). Describe any malfunction or other problem with your voting system during the election. If your county did not experience any problems, please input "None" in the text box below. **None**

14(b). If you will be sending additional information on the malfunctions to IED, how will it be sent? **No Malfunction**

15. How will you be submitting Certified & Final Precinct Level Results for your county to IED? (Please use the Voter Status Counts by Precinct and Split report from SVRS): **Electronic Submission**

16. If you will be sending any additional information to the Election Division, how will it be sent? **Email**

17. Please enter the name, title and mailing address for your county election board members.

| Title | Name | Party Name | Address & Street | City, State, and Zip | E-mail Address | Phone Number |
|---------------------------------------|---------------------|------------|----------------------------------|----------------------|---------------------------------|--------------|
| Clerk/Secretary of the Election Board | ADINA A. ROBERTS | Republican | 150 COURTHOUSE SQUARE, SUITE 244 | GREENSBURG IN 47240 | clerk@decaturcounty.in.gov | 8126638223 |
| Election Board Member | JENNIFER A. STURGES | Republican | 150 COURTHOUSE SQUARE, SUITE 244 | GREENSBURG IN 47240 | jennifer.sturges.rgwr@gmail.com | 8125931280 |
| Election Board Member | RYAN MADDUX | Democratic | 150 COURTHOUSE SQUARE, SUITE 244 | GREENSBURG IN 47240 | MADDUXR@GMAIL.COM | 8125931421 |
| | | | | | | |
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CEB 9 Summary

DeKalb County

REGISTRATION AND TURNOUT:

1. Number of registered voters in **county** for this election (Note: If the election was held only in part of the county, the number of registered voters in that part of the county for this election): **29323**
2. Number of voters voting *in person at the polls on Election Day*: **3842**
3. Number of all voters voting *absentee including by mail, travel board, in-person, and military and overseas (UOCAVA)*: **1984**
4. Total number of voters who voted in this election (auto-calculated as #2 + #3): **5826**

ABSENTEE VOTING

5. Please enter the number of absentee ballots that were rejected (exclude UOCAVA): **0**
- 5(a). Please enter the number of absentee ballots Not Received (Not returned to your county by the deadline): **13**

UOCAVA (Voters using the Federal Postcard Application and Federal Write-In Absentee Ballots)

6. The combined total number of absentee ballots sent by county to military and overseas voters: **8**
7. Total number of ballots in #6 returned by these voters. (Include any Federal Write-In Absentee Ballots, counted, because a UOCAVA did not return an official county ballot.): **7**
8. Total number of ballots in #7 counted: **7**

PROVISIONAL BALLOTS:

9. Total number of provisional ballots counted by county election board: **0**
10. Total number of provisional ballots not counted by county election board: **1**
11. The total number of provisional ballots cast by voters in the county in this election (System calculated as #9 + #10): **1**

ELECTION BUDGET AND EQUIPMENT:

12. BUDGETED cost for this election. Estimate if necessary: **44,892**
- 13(a). Provide the following information for the Election System Type:

| Election System Type | System Service Manufacturer | Voting System Model |
|-------------------------------------|-----------------------------|---------------------|
| Direct Recording Electronic Voting | MicroVote | EMS 4.3 |
| Optical Scan Ballot Tabulator | MicroVote | EMS 4.3 |
| ADA Compliant Ballot Marking Device | MicroVote | EMS 4.3 |
| Election Management System | MicroVote | EMS 4.3 |
| Hand Counted Paper Ballot | NO | |

13(b). Name the System Service Manufacturer used by the County in this Election **MicroVote**

13(c). Describe any discrepancies with your voting system during the election if your County:

None

13(d). Name the Election Pollbook system service provider and the system model used by the county in this election:

| System Service Provider | System Model Number(s) |
|-------------------------|------------------------|
| KNOWiNK LLC | PollPad 2.3.7 |

13(e). Name the EPB System Service Manufacturer used by the County in this Election: **KNOWiNK LLC**

CEB 9 Summary

ENCLOSURES:

14(a). Describe any malfunction or other problem with your voting system during the election. If your county did not experience any problems, please input "None" in the text box below. **None**

14(b). If you will be sending additional information on the malfunctions to IED, how will it be sent? **USPS or Courier**

15. How will you be submitting Certified & Final Precinct Level Results for your county to IED? (Please use the Voter Status Counts by Precinct and Split report from SVRS): **USPS or Courier**

16. If you will be sending any additional information to the Election Division, how will it be sent? **USPS or Courier**

17. Please enter the name, title and mailing address for your county election board members.

| Title | Name | Party Name | Address & Street | City, State, and Zip | E-mail Address | Phone Number |
|---------------------------------------|----------------------|------------|-------------------|----------------------|---------------------------|--------------|
| Clerk/Secretary of the Election Board | HOLLY A ALBRIGHT | Republican | 100 S MAIN STREET | AUBURN IN 46706 | halbright@co.dekalb.in.us | 260-925-9787 |
| Election Board Chairman | TARA LILLY | Republican | 100 S MAIN STREET | AUBURN IN 46706 | taralynnlilly@hotmail.com | 260-925-9787 |
| Election Board Member | SUZANNE DRERUP-DAVIS | Democrat | 100 S MAIN STREET | AUBURN IN 46706 | suzannedavis525@gmail.com | 260-925-9787 |
| | | | | | | |
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CEB 9 Summary

Delaware County

REGISTRATION AND TURNOUT:

1. Number of registered voters in **county** for this election (Note: If the election was held only in part of the county, the number of registered voters in that part of the county for this election): **78210**
2. Number of voters voting *in person at the polls on Election Day*: **9057**
3. Number of all voters voting *absentee including by mail, travel board, in-person, and military and overseas (UOCAVA)*: **1657**
4. Total number of voters who voted in this election (auto-calculated as #2 + #3): **10714**

ABSENTEE VOTING

5. Please enter the number of absentee ballots that were rejected (exclude UOCAVA): **0**
- 5(a). Please enter the number of absentee ballots Not Received (Not returned to your county by the deadline): **16**

UOCAVA (Voters using the Federal Postcard Application and Federal Write-In Absentee Ballots)

6. The combined total number of absentee ballots sent by county to military and overseas voters: **3**
7. Total number of ballots in #6 returned by these voters. (Include any Federal Write-In Absentee Ballots, counted, because a UOCAVA did not return an official county ballot.): **1**
8. Total number of ballots in #7 counted: **1**

PROVISIONAL BALLOTS:

9. Total number of provisional ballots counted by county election board: **4**
10. Total number of provisional ballots not counted by county election board: **1**
11. The total number of provisional ballots cast by voters in the county in this election (System calculated as #9 + #10): **5**

ELECTION BUDGET AND EQUIPMENT:

12. BUDGETED cost for this election. Estimate if necessary: **150,000**
- 13(a). Provide the following information for the Election System Type:

| Election System Type | System Service Manufacturer | Voting System Model |
|-------------------------------------|-----------------------------|---------------------|
| Direct Recording Electronic Voting | MicroVote | EMS 3.1 |
| Optical Scan Ballot Tabulator | MicroVote | EMS 3.1 |
| ADA Compliant Ballot Marking Device | MicroVote | EMS 3.1 |
| Election Management System | MicroVote | EMS 3.1 |
| Hand Counted Paper Ballot | NO | |

- 13(b). Name the System Service Manufacturer used by the County in this Election **MicroVote**

- 13(c). Describe any discrepancies with your voting system during the election if your County:

one+

one microvote machine would not total out. Technician had to return next day and repair.

- 13(d). Name the Election Pollbook system service provider and the system model used by the county in this election:

CEB 9 Summary

| System Service Provider | System Model Number(s) |
|-------------------------|------------------------|
| KNOWiNK LLC | PollPad 3.0 |

13(e). Name the EPB System Service Manufacturer used by the County in this Election: **KNOWiNK LLC**

ENCLOSURES:

14(a). Describe any malfunction or other problem with your voting system during the election. If your county did not experience any problems, please input "None" in the text box below. **None**

14(b). If you will be sending additional information on the malfunctions to IED, how will it be sent? **No Malfunction**

15. How will you be submitting Certified & Final Precinct Level Results for your county to IED? (Please use the Voter Status Counts by Precinct and Split report from SVRS): **Electronic Submission**

16. If you will be sending any additional information to the Election Division, how will it be sent? **Email**

17. Please enter the name, title and mailing address for your county election board members.

| Title | Name | Party Name | Address & Street | City, State, and Zip | E-mail Address | Phone Number |
|---------------------------------------|----------------|------------|-------------------|----------------------|-----------------------------|--------------|
| Election Board Chairman | PETE DRUMM | Republican | 100 W MAIN STREET | MUNCIE IN 47305 | unknown | 765-747-7812 |
| Election Board Member | ASHLEY NICHOLS | Democratic | 100 W MAIN STREET | MUNCIE IN 47305 | unknown | 765-747-7812 |
| Clerk/Secretary of the Election Board | RICK SPANGLER | Republican | 100 W MAIN STREET | MUNCIE IN 47305 | rspangler@co.delaware.in.us | 765-747-7812 |
| | | | | | | |
| | | | | | | |

CEB 9 Summary

Dubois County

REGISTRATION AND TURNOUT:

1. Number of registered voters in **county** for this election (Note: If the election was held only in part of the county, the number of registered voters in that part of the county for this election): **30325**
2. Number of voters voting *in person at the polls on Election Day*: **1868**
3. Number of all voters voting *absentee including by mail, travel board, in-person, and military and overseas (UOCAVA)*: **1460**
4. Total number of voters who voted in this election (auto-calculated as #2 + #3): **3328**

ABSENTEE VOTING

5. Please enter the number of absentee ballots that were rejected (exclude UOCAVA): **0**
- 5(a). Please enter the number of absentee ballots Not Received (Not returned to your county by the deadline): **15**

UOCAVA (Voters using the Federal Postcard Application and Federal Write-In Absentee Ballots)

6. The combined total number of absentee ballots sent by county to military and overseas voters: **2**
7. Total number of ballots in #6 returned by these voters. (Include any Federal Write-In Absentee Ballots, counted, because a UOCAVA did not return an official county ballot.): **2**
8. Total number of ballots in #7 counted: **2**

PROVISIONAL BALLOTS:

9. Total number of provisional ballots counted by county election board: **0**
10. Total number of provisional ballots not counted by county election board: **1**
11. The total number of provisional ballots cast by voters in the county in this election (System calculated as #9 + #10): **1**

ELECTION BUDGET AND EQUIPMENT:

12. BUDGETED cost for this election. Estimate if necessary: **69,500**
- 13(a). Provide the following information for the Election System Type:

| Election System Type | System Service Manufacturer | Voting System Model |
|-------------------------------------|-----------------------------|---------------------|
| Direct Recording Electronic Voting | MicroVote | EMS 4.4 |
| Optical Scan Ballot Tabulator | MicroVote | EMS 4.4 |
| ADA Compliant Ballot Marking Device | MicroVote | EMS 4.4 |
| Election Management System | MicroVote | EMS 4.4 |
| Hand Counted Paper Ballot | YES | |

- 13(b). Name the System Service Manufacturer used by the County in this Election **MicroVote**

- 13(c). Describe any discrepancies with your voting system during the election if your County:
None

- 13(d). Name the Election Pollbook system service provider and the system model used by the county in this election:

| System Service Provider | System Model Number(s) |
|-------------------------|------------------------|
| KNOWiNK LLC | PollPad 3.0.1 |

- 13(e). Name the EPB System Service Manufacturer used by the County in this Election: **KNOWiNK LLC**

CEB 9 Summary

ENCLOSURES:

14(a). Describe any malfunction or other problem with your voting system during the election. If your county did not experience any problems, please input "None" in the text box below. **None**

14(b). If you will be sending additional information on the malfunctions to IED, how will it be sent? **No Malfunction**

15. How will you be submitting Certified & Final Precinct Level Results for your county to IED? (Please use the Voter Status Counts by Precinct and Split report from SVRS): **Electronic Submission**

16. If you will be sending any additional information to the Election Division, how will it be sent? **Email**

17. Please enter the name, title and mailing address for your county election board members.

| Title | Name | Party Name | Address & Street | City, State, and Zip | E-mail Address | Phone Number |
|---------------------------------------|-------------------|------------|-----------------------|----------------------|--------------------------|--------------|
| Clerk/Secretary of the Election Board | AMY L KIPPENBROCK | Republican | ONE COURTHOUSE SQUARE | JASPER IN 47546 | clerk@duboiscountyin.org | 812-481-7035 |
| Election Board Chairman | ROGER MESSMER | Republican | ONE COURTHOUSE SQUARE | JASPER IN 47546 | rmessmer@psci.net | 812-630-6378 |
| Election Board Member | EBER MENJIVAR | Democratic | ONE COURTHOUSE SQUARE | JASPER IN 47546 | emenjivar21@gmail.com | 812-309-9943 |
| | | | | | | |
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CEB 9 Summary

Elkhart County

REGISTRATION AND TURNOUT:

1. Number of registered voters in **county** for this election (Note: If the election was held only in part of the county, the number of registered voters in that part of the county for this election): **125612**
2. Number of voters voting *in person at the polls on Election Day*: **8248**
3. Number of all voters voting *absentee including by mail, travel board, in-person, and military and overseas (UOCAVA)*: **2319**
4. Total number of voters who voted in this election (auto-calculated as #2 + #3): **10567**

ABSENTEE VOTING

5. Please enter the number of absentee ballots that were rejected (exclude UOCAVA): **25**
- 5(a). Please enter the number of absentee ballots Not Received (Not returned to your county by the deadline): **131**

UOCAVA (Voters using the Federal Postcard Application and Federal Write-In Absentee Ballots)

6. The combined total number of absentee ballots sent by county to military and overseas voters: **8**
7. Total number of ballots in #6 returned by these voters. (Include any Federal Write-In Absentee Ballots, counted, because a UOCAVA did not return an official county ballot.): **4**
8. Total number of ballots in #7 counted: **4**

PROVISIONAL BALLOTS:

9. Total number of provisional ballots counted by county election board: **15**
10. Total number of provisional ballots not counted by county election board: **8**
11. The total number of provisional ballots cast by voters in the county in this election (System calculated as #9 + #10): **23**

ELECTION BUDGET AND EQUIPMENT:

12. BUDGETED cost for this election. Estimate if necessary: **600,000**
- 13(a). Provide the following information for the Election System Type:

| Election System Type | System Service Manufacturer | Voting System Model |
|-------------------------------------|-----------------------------|---------------------|
| Direct Recording Electronic Voting | N/A | N/A |
| Optical Scan Ballot Tabulator | ES&S | EVS 5.2.4.0 |
| ADA Compliant Ballot Marking Device | ES&S | EVS 5.2.4.0 |
| Election Management System | ES&S | EVS 5.2.4.0 |
| Hand Counted Paper Ballot | NO | |

- 13(b). Name the System Service Manufacturer used by the County in this Election **ES&S**

- 13(c). Describe any discrepancies with your voting system during the election if your County:
None

- 13(d). Name the Election Pollbook system service provider and the system model used by the county in this election:

| System Service Provider | System Model Number(s) |
|-------------------------|------------------------|
| ES&S | EZRoster 3.7.0.0 |

- 13(e). Name the EPB System Service Manufacturer used by the County in this Election: **ES&S**

CEB 9 Summary

ENCLOSURES:

14(a). Describe any malfunction or other problem with your voting system during the election. If your county did not experience any problems, please input "None" in the text box below. **None**

14(b). If you will be sending additional information on the malfunctions to IED, how will it be sent? **No Malfunction**

15. How will you be submitting Certified & Final Precinct Level Results for your county to IED? (Please use the Voter Status Counts by Precinct and Split report from SVRS): **Electronic Submission**

16. If you will be sending any additional information to the Election Division, how will it be sent? **Email**

17. Please enter the name, title and mailing address for your county election board members.

| Title | Name | Party Name | Address & Street | City, State, and Zip | E-mail Address | Phone Number |
|---------------------------------------|-------------------------|------------|---------------------------|----------------------|-----------------------------|--------------|
| Clerk/Secretary of the Election Board | CHRISTOPHER J. ANDERSON | Republican | 101 N. MAIN ST., ROOM 204 | GOSHEN IN 46526 | canderson@elkhartcounty.com | 5745356692 |
| Election Board Chairman | WAYNE A. KRAMER | Republican | 101 N. MAIN ST., ROOM 204 | GOSHEN IN 46526 | wakramer@comcast.net | 5742980025 |
| Election Board Member | DANIEL B. GRIMES | Democratic | 101 N. MAIN ST., ROOM 204 | GOSHEN IN 46526 | danielbgrimes@gmail.com | 5745343963 |
| | | | | | | |
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CEB 9 Summary

Fayette County

REGISTRATION AND TURNOUT:

1. Number of registered voters in **county** for this election (Note: If the election was held only in part of the county, the number of registered voters in that part of the county for this election): **16528**
2. Number of voters voting *in person at the polls on Election Day*: **2048**
3. Number of all voters voting *absentee including by mail, travel board, in-person, and military and overseas (UOCAVA)*: **823**
4. Total number of voters who voted in this election (auto-calculated as #2 + #3): **2871**

ABSENTEE VOTING

5. Please enter the number of absentee ballots that were rejected (exclude UOCAVA): **2**
- 5(a). Please enter the number of absentee ballots Not Received (Not returned to your county by the deadline): **2**

UOCAVA (Voters using the Federal Postcard Application and Federal Write-In Absentee Ballots)

6. The combined total number of absentee ballots sent by county to military and overseas voters: **4**
7. Total number of ballots in #6 returned by these voters. (Include any Federal Write-In Absentee Ballots, counted, because a UOCAVA did not return an official county ballot.): **4**
8. Total number of ballots in #7 counted: **4**

PROVISIONAL BALLOTS:

9. Total number of provisional ballots counted by county election board: **0**
10. Total number of provisional ballots not counted by county election board: **0**
11. The total number of provisional ballots cast by voters in the county in this election (System calculated as #9 + #10): **0**

ELECTION BUDGET AND EQUIPMENT:

12. BUDGETED cost for this election. Estimate if necessary: **32,000.00**
- 13(a). Provide the following information for the Election System Type:

| Election System Type | System Service Manufacturer | Voting System Model |
|-------------------------------------|-----------------------------|---------------------|
| Direct Recording Electronic Voting | MicroVote | EMS 4.4 |
| Optical Scan Ballot Tabulator | MicroVote | EMS 4.4 |
| ADA Compliant Ballot Marking Device | MicroVote | EMS 4.4 |
| Election Management System | MicroVote | EMS 4.4 |
| Hand Counted Paper Ballot | NO | |

- 13(b). Name the System Service Manufacturer used by the County in this Election **MicroVote**

- 13(c). Describe any discrepancies with your voting system during the election if your County:
None

- 13(d). Name the Election Pollbook system service provider and the system model used by the county in this election:

| System Service Provider | System Model Number(s) |
|-------------------------|------------------------|
| KNOWiNK LLC | PollPad 3.0.1 |

- 13(e). Name the EPB System Service Manufacturer used by the County in this Election: **KNOWiNK LLC**

CEB 9 Summary

ENCLOSURES:

14(a). Describe any malfunction or other problem with your voting system during the election. If your county did not experience any problems, please input "None" in the text box below. **None**

14(b). If you will be sending additional information on the malfunctions to IED, how will it be sent? **No Malfunction**

15. How will you be submitting Certified & Final Precinct Level Results for your county to IED? (Please use the Voter Status Counts by Precinct and Split report from SVRS): **Electronic Submission**

16. If you will be sending any additional information to the Election Division, how will it be sent? **Email**

17. Please enter the name, title and mailing address for your county election board members.

| Title | Name | Party Name | Address & Street | City, State, and Zip | E-mail Address | Phone Number |
|---------------------------------------|--------------|------------|--------------------|-----------------------|------------------------|--------------|
| Clerk/Secretary of the Election Board | LISA WITT | Republican | 401 CENTRAL AVENUE | CONNERSVILLE IN 47331 | clerk@co.fayette.in.us | 7658251813 |
| Election Board Chairman | DORIS CLARK | Republican | 401 CENTRAL AVENUE | CONNERSVILLE IN 47331 | clerk@co.fayette.in.us | 7658251813 |
| Election Board Chairman | NANCY LENGLE | Democratic | 401 CENTRAL AVENUE | CONNERSVILLE IN 47331 | clerk@co.fayette.in.us | 7658251813 |
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CEB 9 Summary

Floyd County

REGISTRATION AND TURNOUT:

1. Number of registered voters in **county** for this election (Note: If the election was held only in part of the county, the number of registered voters in that part of the county for this election): **61413**
2. Number of voters voting *in person at the polls on Election Day*: **5888**
3. Number of all voters voting *absentee including by mail, travel board, in-person, and military and overseas (UOCAVA)*: **4975**
4. Total number of voters who voted in this election (auto-calculated as #2 + #3): **10863**

ABSENTEE VOTING

5. Please enter the number of absentee ballots that were rejected (exclude UOCAVA): **5**
- 5(a). Please enter the number of absentee ballots Not Received (Not returned to your county by the deadline): **21**

UOCAVA (Voters using the Federal Postcard Application and Federal Write-In Absentee Ballots)

6. The combined total number of absentee ballots sent by county to military and overseas voters: **11**
7. Total number of ballots in #6 returned by these voters. (Include any Federal Write-In Absentee Ballots, counted, because a UOCAVA did not return an official county ballot.): **10**
8. Total number of ballots in #7 counted: **10**

PROVISIONAL BALLOTS:

9. Total number of provisional ballots counted by county election board: **3**
10. Total number of provisional ballots not counted by county election board: **0**
11. The total number of provisional ballots cast by voters in the county in this election (System calculated as #9 + #10): **3**

ELECTION BUDGET AND EQUIPMENT:

12. BUDGETED cost for this election. Estimate if necessary: **200,000.00**
- 13(a). Provide the following information for the Election System Type:

| Election System Type | System Service Manufacturer | Voting System Model |
|-------------------------------------|-----------------------------|---------------------|
| Direct Recording Electronic Voting | Unisyn | OpenElect 2.0A |
| Optical Scan Ballot Tabulator | Unisyn | OpenElect 2.0A |
| ADA Compliant Ballot Marking Device | Unisyn | OpenElect 2.0A |
| Election Management System | Unisyn | OpenElect 2.0A |
| Hand Counted Paper Ballot | NO | |

- 13(b). Name the System Service Manufacturer used by the County in this Election **RBM**

- 13(c). Describe any discrepancies with your voting system during the election if your County:

None

- 13(d). Name the Election Pollbook system service provider and the system model used by the county in this election:

| System Service Provider | System Model Number(s) |
|-------------------------|------------------------|
| VR Systems | EVid 2.2 |

- 13(e). Name the EPB System Service Manufacturer used by the County in this Election: **VR Systems**

CEB 9 Summary

ENCLOSURES:

14(a). Describe any malfunction or other problem with your voting system during the election. If your county did not experience any problems, please input "None" in the text box below. **None**

14(b). If you will be sending additional information on the malfunctions to IED, how will it be sent? **Email**

15. How will you be submitting Certified & Final Precinct Level Results for your county to IED? (Please use the Voter Status Counts by Precinct and Split report from SVRS): **Electronic Submission**

16. If you will be sending any additional information to the Election Division, how will it be sent? **Email**

17. Please enter the name, title and mailing address for your county election board members.

| Title | Name | Party Name | Address & Street | City, State, and Zip | E-mail Address | Phone Number |
|---------------------------------------|----------------|------------|---------------------------|----------------------|---------------------------|--------------|
| Clerk/Secretary of the Election Board | DANITA L BURKS | Republican | 311 HAUSS SQUARE ROOM 235 | NEW ALBANY IN 47150 | dburks@floydcounty.in.gov | 8125423043 |
| Election Board Chairman | RICHARD FOX | Republican | 311 HAUSS SQUARE ROOM 235 | NEW ALBANY IN 47150 | rfox@thefoxlawoffices.com | 8129442600 |
| Election Board Member | SHANE GIBSON | Democratic | 311 HAUSS SQUARE ROOM 235 | NEW ALBANY IN 47150 | shane@shanegibsonlaw.com | 8129485419 |
| | | | | | | |
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CEB 9 Summary

Fountain County

REGISTRATION AND TURNOUT:

1. Number of registered voters in **county** for this election (Note: If the election was held only in part of the county, the number of registered voters in that part of the county for this election): **11816**
2. Number of voters voting *in person at the polls on Election Day*: **2709**
3. Number of all voters voting *absentee including by mail, travel board, in-person, and military and overseas (UOCAVA)*: **448**
4. Total number of voters who voted in this election (auto-calculated as #2 + #3): **3157**

ABSENTEE VOTING

5. Please enter the number of absentee ballots that were rejected (exclude UOCAVA): **0**
- 5(a). Please enter the number of absentee ballots Not Received (Not returned to your county by the deadline): **6**

UOCAVA (Voters using the Federal Postcard Application and Federal Write-In Absentee Ballots)

6. The combined total number of absentee ballots sent by county to military and overseas voters: **1**
7. Total number of ballots in #6 returned by these voters. (Include any Federal Write-In Absentee Ballots, counted, because a UOCAVA did not return an official county ballot.): **1**
8. Total number of ballots in #7 counted: **1**

PROVISIONAL BALLOTS:

9. Total number of provisional ballots counted by county election board: **2**
10. Total number of provisional ballots not counted by county election board: **7**
11. The total number of provisional ballots cast by voters in the county in this election (System calculated as #9 + #10): **9**

ELECTION BUDGET AND EQUIPMENT:

12. BUDGETED cost for this election. Estimate if necessary: **36,000**
- 13(a). Provide the following information for the Election System Type:

| Election System Type | System Service Manufacturer | Voting System Model |
|-------------------------------------|-----------------------------|---------------------|
| Direct Recording Electronic Voting | N/A | N/A |
| Optical Scan Ballot Tabulator | Hart InterCivic | Verity 2.5 |
| ADA Compliant Ballot Marking Device | Hart InterCivic | Verity 2.5 |
| Election Management System | Hart InterCivic | Verity 2.5 |
| Hand Counted Paper Ballot | NO | |

- 13(b). Name the System Service Manufacturer used by the County in this Election **GBS**

- 13(c). Describe any discrepancies with your voting system during the election if your County:

None

- 13(d). Name the Election Pollbook system service provider and the system model used by the county in this election:

| System Service Provider | System Model Number(s) |
|-------------------------|------------------------|
| KNOWiNK LLC | PollPad 2.5.8 |

- 13(e). Name the EPB System Service Manufacturer used by the County in this Election: **KNOWiNK LLC**

CEB 9 Summary

ENCLOSURES:

14(a). Describe any malfunction or other problem with your voting system during the election. If your county did not experience any problems, please input "None" in the text box below. **None**

14(b). If you will be sending additional information on the malfunctions to IED, how will it be sent? **No Malfunction**

15. How will you be submitting Certified & Final Precinct Level Results for your county to IED? (Please use the Voter Status Counts by Precinct and Split report from SVRS): **Electronic Submission**

16. If you will be sending any additional information to the Election Division, how will it be sent? **Email**

17. Please enter the name, title and mailing address for your county election board members.

| Title | Name | Party Name | Address & Street | City, State, and Zip | E-mail Address | Phone Number |
|---------------------------------------|------------------|------------|------------------|----------------------|----------------------------|--------------|
| Election Board Chairman | LISA CRUEA | Republican | 301 4TH STREET | COVINGTON IN 47932 | lisacruea_home@yahoo.com | 765-793-6230 |
| Election Board Member | ROBERT SHELBY | Democratic | 301 4TH STREET | COVINGTON IN 47932 | rbshelby47@gmail.com | 765-793-6230 |
| Clerk/Secretary of the Election Board | PAULA COPENHAVER | Republican | 301 4TH STREET | COVINGTON IN 47932 | pcopenhaver@fountainco.net | 765-793-6230 |
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CEB 9 Summary

Franklin County

REGISTRATION AND TURNOUT:

1. Number of registered voters in **county** for this election (Note: If the election was held only in part of the county, the number of registered voters in that part of the county for this election): **16975**
2. Number of voters voting *in person at the polls on Election Day*: **2859**
3. Number of all voters voting *absentee including by mail, travel board, in-person, and military and overseas (UOCAVA)*: **535**
4. Total number of voters who voted in this election (auto-calculated as #2 + #3): **3394**

ABSENTEE VOTING

5. Please enter the number of absentee ballots that were rejected (exclude UOCAVA): **0**
- 5(a). Please enter the number of absentee ballots Not Received (Not returned to your county by the deadline): **16**

UOCAVA (Voters using the Federal Postcard Application and Federal Write-In Absentee Ballots)

6. The combined total number of absentee ballots sent by county to military and overseas voters: **3**
7. Total number of ballots in #6 returned by these voters. (Include any Federal Write-In Absentee Ballots, counted, because a UOCAVA did not return an official county ballot.): **3**
8. Total number of ballots in #7 counted: **3**

PROVISIONAL BALLOTS:

9. Total number of provisional ballots counted by county election board: **0**
10. Total number of provisional ballots not counted by county election board: **0**
11. The total number of provisional ballots cast by voters in the county in this election (System calculated as #9 + #10): **0**

ELECTION BUDGET AND EQUIPMENT:

12. BUDGETED cost for this election. Estimate if necessary: **42,000**
- 13(a). Provide the following information for the Election System Type:

| Election System Type | System Service Manufacturer | Voting System Model |
|-------------------------------------|-----------------------------|---------------------|
| Direct Recording Electronic Voting | MicroVote | EMS 4.4 |
| Optical Scan Ballot Tabulator | MicroVote | EMS 4.4 |
| ADA Compliant Ballot Marking Device | MicroVote | EMS 4.4 |
| Election Management System | MicroVote | EMS 4.4 |
| Hand Counted Paper Ballot | NO | |

13(b). Name the System Service Manufacturer used by the County in this Election **MicroVote**

13(c). Describe any discrepancies with your voting system during the election if your County:

None

13(d). Name the Election Pollbook system service provider and the system model used by the county in this election:

| System Service Provider | System Model Number(s) |
|-------------------------|------------------------|
| KNOWiNK LLC | PollPad 3.0.1 |

13(e). Name the EPB System Service Manufacturer used by the County in this Election: **KNOWiNK LLC**

CEB 9 Summary

ENCLOSURES:

14(a). Describe any malfunction or other problem with your voting system during the election. If your county did not experience any problems, please input "None" in the text box below. **None**

14(b). If you will be sending additional information on the malfunctions to IED, how will it be sent? **No Malfunction**

15. How will you be submitting Certified & Final Precinct Level Results for your county to IED? (Please use the Voter Status Counts by Precinct and Split report from SVRS): **Electronic Submission**

16. If you will be sending any additional information to the Election Division, how will it be sent? **Email**

17. Please enter the name, title and mailing address for your county election board members.

| Title | Name | Party Name | Address & Street | City, State, and Zip | E-mail Address | Phone Number |
|---------------------------------------|----------------|------------|------------------|----------------------|-------------------------------|--------------|
| Clerk/Secretary of the Election Board | NEYSA R RAIBLE | Republican | 459 MAIN STREET | BROOKVILLE IN 47012 | nraible@franklincounty.in.gov | 7656475111 |
| Election Board Chairman | LINDA VAUGHAN | Democratic | 459 MAIN STREET | BROOKVILLE IN 47012 | lvaughan3@frontier.com | 5133748323 |
| Election Board Member | ROBERT BRAUN | Republican | 459 MAIN STREET | BROOKVILLE IN 47012 | rockynch2@yahoo.com | 5135106868 |
| | | | | | | |
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CEB 9 Summary

Fulton County

REGISTRATION AND TURNOUT:

1. Number of registered voters in **county** for this election (Note: If the election was held only in part of the county, the number of registered voters in that part of the county for this election): **13212**
2. Number of voters voting *in person at the polls on Election Day*: **1722**
3. Number of all voters voting *absentee including by mail, travel board, in-person, and military and overseas (UOCAVA)*: **1089**
4. Total number of voters who voted in this election (auto-calculated as #2 + #3): **2811**

ABSENTEE VOTING

5. Please enter the number of absentee ballots that were rejected (exclude UOCAVA): **0**
- 5(a). Please enter the number of absentee ballots Not Received (Not returned to your county by the deadline): **0**

UOCAVA (Voters using the Federal Postcard Application and Federal Write-In Absentee Ballots)

6. The combined total number of absentee ballots sent by county to military and overseas voters: **2**
7. Total number of ballots in #6 returned by these voters. (Include any Federal Write-In Absentee Ballots, counted, because a UOCAVA did not return an official county ballot.): **2**
8. Total number of ballots in #7 counted: **2**

PROVISIONAL BALLOTS:

9. Total number of provisional ballots counted by county election board: **0**
10. Total number of provisional ballots not counted by county election board: **1**
11. The total number of provisional ballots cast by voters in the county in this election (System calculated as #9 + #10): **1**

ELECTION BUDGET AND EQUIPMENT:

12. BUDGETED cost for this election. Estimate if necessary: **35,000.00**
- 13(a). Provide the following information for the Election System Type:

| Election System Type | System Service Manufacturer | Voting System Model |
|-------------------------------------|-----------------------------|---------------------|
| Direct Recording Electronic Voting | Hart InterCivic | HVS 6.2.2 |
| Optical Scan Ballot Tabulator | Hart InterCivic | HVS 6.2.2 |
| ADA Compliant Ballot Marking Device | Hart InterCivic | HVS 6.2.2 |
| Election Management System | Hart InterCivic | HVS 6.2.2 |
| Hand Counted Paper Ballot | NO | |

- 13(b). Name the System Service Manufacturer used by the County in this Election **GBS**

- 13(c). Describe any discrepancies with your voting system during the election if your County:
None

- 13(d). Name the Election Pollbook system service provider and the system model used by the county in this election:

| System Service Provider | System Model Number(s) |
|-------------------------|------------------------|
| VR Systems | EVid Next 1.9.104 |

- 13(e). Name the EPB System Service Manufacturer used by the County in this Election: **VR Systems**

CEB 9 Summary

ENCLOSURES:

14(a). Describe any malfunction or other problem with your voting system during the election. If your county did not experience any problems, please input "None" in the text box below. **None**

14(b). If you will be sending additional information on the malfunctions to IED, how will it be sent? **No Malfunction**

15. How will you be submitting Certified & Final Precinct Level Results for your county to IED? (Please use the Voter Status Counts by Precinct and Split report from SVRS): **Electronic Submission**

16. If you will be sending any additional information to the Election Division, how will it be sent? **Electronic Submission**

17. Please enter the name, title and mailing address for your county election board members.

| Title | Name | Party Name | Address & Street | City, State, and Zip | E-mail Address | Phone Number |
|---------------------------------------|--------------------|------------|------------------|----------------------|------------------------|--------------|
| Clerk/Secretary of the Election Board | TERESA FURNIVALL | Republican | 815 MAIN ST | ROCHESTER IN 46975 | clerk@co.fulton.IN.US | 574-223-4824 |
| Election Board Member | LAURA CALVERT | Republican | 815 MAIN ST | ROCHESTER IN 46975 | lilypad@rtcol.com | 574-835-5320 |
| Election Board Member | DENNIS GROSSNICKLE | Democratic | 815 MAIN ST | ROCHESTER IN 46975 | lauracalvert@gmail.com | 574-835-3586 |
| | | | | | | |
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CEB 9 Summary

Gibson County

REGISTRATION AND TURNOUT:

1. Number of registered voters in **county** for this election (Note: If the election was held only in part of the county, the number of registered voters in that part of the county for this election): **23923**
2. Number of voters voting *in person at the polls on Election Day*: **3164**
3. Number of all voters voting *absentee including by mail, travel board, in-person, and military and overseas (UOCAVA)*: **978**
4. Total number of voters who voted in this election (auto-calculated as #2 + #3): **4142**

ABSENTEE VOTING

5. Please enter the number of absentee ballots that were rejected (exclude UOCAVA): **0**
- 5(a). Please enter the number of absentee ballots Not Received (Not returned to your county by the deadline): **5**

UOCAVA (Voters using the Federal Postcard Application and Federal Write-In Absentee Ballots)

6. The combined total number of absentee ballots sent by county to military and overseas voters: **1**
7. Total number of ballots in #6 returned by these voters. (Include any Federal Write-In Absentee Ballots, counted, because a UOCAVA did not return an official county ballot.): **1**
8. Total number of ballots in #7 counted: **1**

PROVISIONAL BALLOTS:

9. Total number of provisional ballots counted by county election board: **0**
10. Total number of provisional ballots not counted by county election board: **5**
11. The total number of provisional ballots cast by voters in the county in this election (System calculated as #9 + #10): **5**

ELECTION BUDGET AND EQUIPMENT:

12. BUDGETED cost for this election. Estimate if necessary: **0**
- 13(a). Provide the following information for the Election System Type:

| Election System Type | System Service Manufacturer | Voting System Model |
|-------------------------------------|-----------------------------|---------------------|
| Direct Recording Electronic Voting | N/A | N/A |
| Optical Scan Ballot Tabulator | Hart InterCivic | Verity 2.5 |
| ADA Compliant Ballot Marking Device | Hart InterCivic | Verity 2.5 |
| Election Management System | Hart InterCivic | Verity 2.5 |
| Hand Counted Paper Ballot | NO | |

13(b). Name the System Service Manufacturer used by the County in this Election **Harp**.

13(c). Describe any discrepancies with your voting system during the election if your County:
None

13(d). Name the Election Pollbook system service provider and the system model used by the county in this election:

| System Service Provider | System Model Number(s) |
|-------------------------|------------------------|
| KNOWiNK LLC | PollPad 3.0 |

13(e). Name the EPB System Service Manufacturer used by the County in this Election: **MicroVote**

CEB 9 Summary

ENCLOSURES:

14(a). Describe any malfunction or other problem with your voting system during the election. If your county did not experience any problems, please input "None" in the text box below. **None**

14(b). If you will be sending additional information on the malfunctions to IED, how will it be sent? **No Malfunction**

15. How will you be submitting Certified & Final Precinct Level Results for your county to IED? (Please use the Voter Status Counts by Precinct and Split report from SVRS): **Electronic Submission**

16. If you will be sending any additional information to the Election Division, how will it be sent? **USPS or Courier**

17. Please enter the name, title and mailing address for your county election board members.

| Title | Name | Party Name | Address & Street | City, State, and Zip | E-mail Address | Phone Number |
|---------------------------------------|----------------------|------------|------------------|----------------------|-----------------------------|--------------|
| Clerk/Secretary of the Election Board | JIM MORROW | Republican | 101 N. MAIN ST. | PRINCETON IN 47670 | jmorrow@gibsoncounty-in.gov | 8123852541 |
| Election Board Chairman | JIMMY BRYANT | Republican | 101 N. MAIN ST. | PRINCETON IN 47670 | gstraw@gibsoncounty-in.gov | 8123852541 |
| Election Board Member | STEPHEN E RICHARDSON | Democratic | 101 N. MAIN ST. | PRINCETON IN 47670 | serichardson1@yahoo.com | 8123852541 |
| | | | | | | |
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CEB 9 Summary

Grant County

REGISTRATION AND TURNOUT:

1. Number of registered voters in **county** for this election (Note: If the election was held only in part of the county, the number of registered voters in that part of the county for this election): **43753**
2. Number of voters voting *in person at the polls on Election Day*: **5764**
3. Number of all voters voting *absentee including by mail, travel board, in-person, and military and overseas (UOCAVA)*: **1742**
4. Total number of voters who voted in this election (auto-calculated as #2 + #3): **7506**

ABSENTEE VOTING

5. Please enter the number of absentee ballots that were rejected (exclude UOCAVA): **10**
- 5(a). Please enter the number of absentee ballots Not Received (Not returned to your county by the deadline): **59**

UOCAVA (Voters using the Federal Postcard Application and Federal Write-In Absentee Ballots)

6. The combined total number of absentee ballots sent by county to military and overseas voters: **1**
7. Total number of ballots in #6 returned by these voters. (Include any Federal Write-In Absentee Ballots, counted, because a UOCAVA did not return an official county ballot.): **1**
8. Total number of ballots in #7 counted: **1**

PROVISIONAL BALLOTS:

9. Total number of provisional ballots counted by county election board: **0**
10. Total number of provisional ballots not counted by county election board: **2**
11. The total number of provisional ballots cast by voters in the county in this election (System calculated as #9 + #10): **2**

ELECTION BUDGET AND EQUIPMENT:

12. BUDGETED cost for this election. Estimate if necessary: **58,302**
- 13(a). Provide the following information for the Election System Type:

| Election System Type | System Service Manufacturer | Voting System Model |
|-------------------------------------|-----------------------------|---------------------|
| Direct Recording Electronic Voting | MicroVote | EMS 4.4 |
| Optical Scan Ballot Tabulator | MicroVote | EMS 4.4 |
| ADA Compliant Ballot Marking Device | N/A | N/A |
| Election Management System | MicroVote | EMS 4.4 |
| Hand Counted Paper Ballot | NO | |

13(b). Name the System Service Manufacturer used by the County in this Election **MicroVote**

13(c). Describe any discrepancies with your voting system during the election if your County:

None

13(d). Name the Election Pollbook system service provider and the system model used by the county in this election:

| System Service Provider | System Model Number(s) |
|-------------------------|------------------------|
| KNOWiNK LLC | PollPad 3.0.1 |

13(e). Name the EPB System Service Manufacturer used by the County in this Election: **MicroVote**

CEB 9 Summary

ENCLOSURES:

14(a). Describe any malfunction or other problem with your voting system during the election. If your county did not experience any problems, please input "None" in the text box below. **None**

14(b). If you will be sending additional information on the malfunctions to IED, how will it be sent? **No Malfunction**

15. How will you be submitting Certified & Final Precinct Level Results for your county to IED? (Please use the Voter Status Counts by Precinct and Split report from SVRS): **Electronic Submission**

16. If you will be sending any additional information to the Election Division, how will it be sent? **Email**

17. Please enter the name, title and mailing address for your county election board members.

| Title | Name | Party Name | Address & Street | City, State, and Zip | E-mail Address | Phone Number |
|---------------------------------------|-------------------|------------|--------------------|----------------------|----------------------------|--------------|
| Election Board Chairman | CRAIG PERSINGER | Republican | 509 W. NELSON ST. | MARION IN 46952 | crpersinger@yahoo.com | 765-251-3453 |
| Election Board Member | BARBARA STODGHILL | Democratic | 4877 N. BROOKE DR. | MARION IN 46952 | stodghillbarbara@gmail.com | 765-603-0805 |
| Clerk/Secretary of the Election Board | PAMELA HARRIS | Republican | 101 E. 4TH ST. | MARION IN 46952 | pharris@grantcounty.net | 765-668-8121 |
| | | | | | | |
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CEB 9 Summary

Greene County

REGISTRATION AND TURNOUT:

1. Number of registered voters in **county** for this election (Note: If the election was held only in part of the county, the number of registered voters in that part of the county for this election): **20802**
2. Number of voters voting *in person at the polls on Election Day*: **3353**
3. Number of all voters voting *absentee including by mail, travel board, in-person, and military and overseas (UOCAVA)*: **1037**
4. Total number of voters who voted in this election (auto-calculated as #2 + #3): **4390**

ABSENTEE VOTING

5. Please enter the number of absentee ballots that were rejected (exclude UOCAVA): **2**
- 5(a). Please enter the number of absentee ballots Not Received (Not returned to your county by the deadline): **24**

UOCAVA (Voters using the Federal Postcard Application and Federal Write-In Absentee Ballots)

6. The combined total number of absentee ballots sent by county to military and overseas voters: **3**
7. Total number of ballots in #6 returned by these voters. (Include any Federal Write-In Absentee Ballots, counted, because a UOCAVA did not return an official county ballot.): **3**
8. Total number of ballots in #7 counted: **3**

PROVISIONAL BALLOTS:

9. Total number of provisional ballots counted by county election board: **3**
10. Total number of provisional ballots not counted by county election board: **4**
11. The total number of provisional ballots cast by voters in the county in this election (System calculated as #9 + #10): **7**

ELECTION BUDGET AND EQUIPMENT:

12. BUDGETED cost for this election. Estimate if necessary: **40,000**
- 13(a). Provide the following information for the Election System Type:

| Election System Type | System Service Manufacturer | Voting System Model |
|-------------------------------------|-----------------------------|---------------------|
| Direct Recording Electronic Voting | MicroVote | EMS 4.1 |
| Optical Scan Ballot Tabulator | MicroVote | EMS 4.1 |
| ADA Compliant Ballot Marking Device | MicroVote | EMS 4.1 |
| Election Management System | MicroVote | EMS 4.1 |
| Hand Counted Paper Ballot | NO | |

13(b). Name the System Service Manufacturer used by the County in this Election **MicroVote**

13(c). Describe any discrepancies with your voting system during the election if your County:
none

13(d). Name the Election Pollbook system service provider and the system model used by the county in this election:

| System Service Provider | System Model Number(s) |
|-------------------------|------------------------|
| KNOWiNK LLC | PollPad 2.3.7 |

13(e). Name the EPB System Service Manufacturer used by the County in this Election: **KNOWiNK LLC**

CEB 9 Summary

ENCLOSURES:

14(a). Describe any malfunction or other problem with your voting system during the election. If your county did not experience any problems, please input "None" in the text box below. **none**

14(b). If you will be sending additional information on the malfunctions to IED, how will it be sent? **No Malfunction**

15. How will you be submitting Certified & Final Precinct Level Results for your county to IED? (Please use the Voter Status Counts by Precinct and Split report from SVRS): **Electronic Submission**

16. If you will be sending any additional information to the Election Division, how will it be sent? **Fax**

17. Please enter the name, title and mailing address for your county election board members.

| Title | Name | Party Name | Address & Street | City, State, and Zip | E-mail Address | Phone Number |
|---------------------------------------|---------------|------------|------------------|--------------------------|-------------------------------|--------------|
| Clerk/Secretary of the Election Board | STUART DOWDEN | Republican | 1 E MAIN ST | BLOOMFIELD IN 47424 | REGISTRATION@CO.G REENE.IN.US | 8123842015 |
| Election Board Chairman | DAVE BAILEY | Democratic | PO BOX 229 | BLOOMFIELD IN 47424-0229 | REGISTRATION@CO.G REENE.IN.US | 8123842915 |
| Election Board Member | NANCY HUDSON | Republican | 1 E MAIN ST | BLOOMFIELD IN 47424 | REGISTRATION@CO.G REENE.IN.US | 8123842015 |
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CEB 9 Summary

Hamilton County

REGISTRATION AND TURNOUT:

1. Number of registered voters in **county** for this election (Note: If the election was held only in part of the county, the number of registered voters in that part of the county for this election): **264396**
2. Number of voters voting *in person at the polls on Election Day*: **24232**
3. Number of all voters voting *absentee including by mail, travel board, in-person, and military and overseas (UOCAVA)*: **6764**
4. Total number of voters who voted in this election (auto-calculated as #2 + #3): **30996**

ABSENTEE VOTING

5. Please enter the number of absentee ballots that were rejected (exclude UOCAVA): **2**
- 5(a). Please enter the number of absentee ballots Not Received (Not returned to your county by the deadline): **323**

UOCAVA (Voters using the Federal Postcard Application and Federal Write-In Absentee Ballots)

6. The combined total number of absentee ballots sent by county to military and overseas voters: **38**
7. Total number of ballots in #6 returned by these voters. (Include any Federal Write-In Absentee Ballots, counted, because a UOCAVA did not return an official county ballot.): **30**
8. Total number of ballots in #7 counted: **30**

PROVISIONAL BALLOTS:

9. Total number of provisional ballots counted by county election board: **2**
10. Total number of provisional ballots not counted by county election board: **5**
11. The total number of provisional ballots cast by voters in the county in this election (System calculated as #9 + #10): **7**

ELECTION BUDGET AND EQUIPMENT:

12. BUDGETED cost for this election. Estimate if necessary: **200,000**
- 13(a). Provide the following information for the Election System Type:

| Election System Type | System Service Manufacturer | Voting System Model |
|-------------------------------------|-----------------------------|---------------------|
| Direct Recording Electronic Voting | MicroVote | EMS 4.4 |
| Optical Scan Ballot Tabulator | MicroVote | EMS 4.4 |
| ADA Compliant Ballot Marking Device | MicroVote | EMS 4.4 |
| Election Management System | MicroVote | EMS 4.4 |
| Hand Counted Paper Ballot | NO | |

- 13(b). Name the System Service Manufacturer used by the County in this Election **KNOWiNK LLC**

- 13(c). Describe any discrepancies with your voting system during the election if your County:

None

- 13(d). Name the Election Pollbook system service provider and the system model used by the county in this election:

| System Service Provider | System Model Number(s) |
|-------------------------|------------------------|
| KNOWiNK LLC | PollPad 3.0.1 |

- 13(e). Name the EPB System Service Manufacturer used by the County in this Election: **MicroVote**

CEB 9 Summary

ENCLOSURES:

14(a). Describe any malfunction or other problem with your voting system during the election. If your county did not experience any problems, please input "None" in the text box below. **None**

14(b). If you will be sending additional information on the malfunctions to IED, how will it be sent? **No Malfunction**

15. How will you be submitting Certified & Final Precinct Level Results for your county to IED? (Please use the Voter Status Counts by Precinct and Split report from SVRS): **Electronic Submission**

16. If you will be sending any additional information to the Election Division, how will it be sent? **Electronic Submission**

17. Please enter the name, title and mailing address for your county election board members.

| Title | Name | Party Name | Address & Street | City, State, and Zip | E-mail Address | Phone Number |
|---------------------------------------|----------------------|------------|-------------------|----------------------|--------------------------------------|--------------|
| Election Board Chairman | RAY ADLER | Republican | 1 HAMILTON CTY SQ | NOBLESVILLE IN 46060 | ray@noblesvilleattorney.com | 3177768476 |
| Election Board Member | GREG PURVIS | Democrat | 1 HAMILTON CTY SQ | NOBLESVILLE IN 46060 | gpurvis46037@gmail.com | 3177768476 |
| Clerk/Secretary of the Election Board | KATHY KREAG WILLIAMS | Republican | 1 HAMILTON CTY SQ | NOBLESVILLE IN 46060 | kathy.williams@hamiltoncounty.in.gov | 3177769724 |
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CEB 9 Summary

Hancock County

REGISTRATION AND TURNOUT:

1. Number of registered voters in **county** for this election (Note: If the election was held only in part of the county, the number of registered voters in that part of the county for this election): **59550**
2. Number of voters voting *in person at the polls on Election Day*: **4865**
3. Number of all voters voting *absentee including by mail, travel board, in-person, and military and overseas (UOCAVA)*: **3821**
4. Total number of voters who voted in this election (auto-calculated as #2 + #3): **8686**

ABSENTEE VOTING

5. Please enter the number of absentee ballots that were rejected (exclude UOCAVA): **10**
- 5(a). Please enter the number of absentee ballots Not Received (Not returned to your county by the deadline): **31**

UOCAVA (Voters using the Federal Postcard Application and Federal Write-In Absentee Ballots)

6. The combined total number of absentee ballots sent by county to military and overseas voters: **16**
7. Total number of ballots in #6 returned by these voters. (Include any Federal Write-In Absentee Ballots, counted, because a UOCAVA did not return an official county ballot.): **14**
8. Total number of ballots in #7 counted: **14**

PROVISIONAL BALLOTS:

9. Total number of provisional ballots counted by county election board: **0**
10. Total number of provisional ballots not counted by county election board: **6**
11. The total number of provisional ballots cast by voters in the county in this election (System calculated as #9 + #10): **6**

ELECTION BUDGET AND EQUIPMENT:

12. BUDGETED cost for this election. Estimate if necessary: **78,900**
- 13(a). Provide the following information for the Election System Type:

| Election System Type | System Service Manufacturer | Voting System Model |
|-------------------------------------|-----------------------------|---------------------|
| Direct Recording Electronic Voting | N/A | N/A |
| Optical Scan Ballot Tabulator | ES&S | EVS 5.2.0.0 |
| ADA Compliant Ballot Marking Device | ES&S | EVS 5.2.0.0 |
| Election Management System | ES&S | EVS 5.2.0.0 |
| Hand Counted Paper Ballot | NO | |

- 13(b). Name the System Service Manufacturer used by the County in this Election **ES&S**

- 13(c). Describe any discrepancies with your voting system during the election if your County:

One express vote stopped working. Had to run a different one out to vote center location.

- 13(d). Name the Election Pollbook system service provider and the system model used by the county in this election:

| System Service Provider | System Model Number(s) |
|-------------------------|------------------------|
| KNOWiNK LLC | PollPad 2.3.7 |

- 13(e). Name the EPB System Service Manufacturer used by the County in this Election: **KNOWiNK LLC**

CEB 9 Summary

ENCLOSURES:

14(a). Describe any malfunction or other problem with your voting system during the election. If your county did not experience any problems, please input "None" in the text box below. **None**

14(b). If you will be sending additional information on the malfunctions to IED, how will it be sent? **No Malfunction**

15. How will you be submitting Certified & Final Precinct Level Results for your county to IED? (Please use the Voter Status Counts by Precinct and Split report from SVRS): **Email**

16. If you will be sending any additional information to the Election Division, how will it be sent? **Email**

17. Please enter the name, title and mailing address for your county election board members.

| Title | Name | Party Name | Address & Street | City, State, and Zip | E-mail Address | Phone Number |
|---------------------------------------|-------------------------|------------|----------------------|----------------------|-------------------------------|--------------|
| Clerk/Secretary of the Election Board | LISA EBERHARDT LOFGREEN | REPUBLICAN | 9 E. MAIN ST, RM 227 | GREENFIELD IN 46140 | LLOFFGREEN@HANCOCKCOINGOV.ORG | 317-477-1109 |
| Election Board Chairman | JOHN APPLE | REPUBLICAN | 9 E. MAIN ST, RM 227 | GREENFIELD IN 46140 | APPLEOXFORDS@GMAIL.COM | 317-409-3058 |
| Election Board Member | ROBERT BOGIGIAN | DEMOCRATIC | 9 E. MAIN ST, RM 227 | GREENFIELD IN 46140 | RBOGIGIAN@SBCGLOBAL.NET | 317-435-8075 |
| | | | | | | |
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CEB 9 Summary

Harrison County

REGISTRATION AND TURNOUT:

1. Number of registered voters in **county** for this election (Note: If the election was held only in part of the county, the number of registered voters in that part of the county for this election): **29366**
2. Number of voters voting *in person at the polls on Election Day*: **4492**
3. Number of all voters voting *absentee including by mail, travel board, in-person, and military and overseas (UOCAVA)*: **1024**
4. Total number of voters who voted in this election (auto-calculated as #2 + #3): **5516**

ABSENTEE VOTING

5. Please enter the number of absentee ballots that were rejected (exclude UOCAVA): **0**
- 5(a). Please enter the number of absentee ballots Not Received (Not returned to your county by the deadline): **53**

UOCAVA (Voters using the Federal Postcard Application and Federal Write-In Absentee Ballots)

6. The combined total number of absentee ballots sent by county to military and overseas voters: **4**
7. Total number of ballots in #6 returned by these voters. (Include any Federal Write-In Absentee Ballots, counted, because a UOCAVA did not return an official county ballot.): **1**
8. Total number of ballots in #7 counted: **1**

PROVISIONAL BALLOTS:

9. Total number of provisional ballots counted by county election board: **8**
10. Total number of provisional ballots not counted by county election board: **3**
11. The total number of provisional ballots cast by voters in the county in this election (System calculated as #9 + #10): **11**

ELECTION BUDGET AND EQUIPMENT:

12. BUDGETED cost for this election. Estimate if necessary: **50,413.58**
- 13(a). Provide the following information for the Election System Type:

| Election System Type | System Service Manufacturer | Voting System Model |
|-------------------------------------|-----------------------------|---------------------|
| Direct Recording Electronic Voting | N/A | N/A |
| Optical Scan Ballot Tabulator | Hart InterCivic | Verity 2.5 |
| ADA Compliant Ballot Marking Device | Hart InterCivic | Verity 2.5 |
| Election Management System | Hart InterCivic | Verity 2.5 |
| Hand Counted Paper Ballot | NO | |

13(b). Name the System Service Manufacturer used by the County in this Election **Harp**.

13(c). Describe any discrepancies with your voting system during the election if your County:

NONE

13(d). Name the Election Pollbook system service provider and the system model used by the county in this election:

| System Service Provider | System Model Number(s) |
|-------------------------|------------------------|
| KNOWiNK LLC | PollPad 3.0.1 |

13(e). Name the EPB System Service Manufacturer used by the County in this Election: **MicroVote**

CEB 9 Summary

ENCLOSURES:

14(a). Describe any malfunction or other problem with your voting system during the election. If your county did not experience any problems, please input "None" in the text box below. **NONE**

14(b). If you will be sending additional information on the malfunctions to IED, how will it be sent? **Email**

15. How will you be submitting Certified & Final Precinct Level Results for your county to IED? (Please use the Voter Status Counts by Precinct and Split report from SVRS): **Electronic Submission**

16. If you will be sending any additional information to the Election Division, how will it be sent? **Email**

17. Please enter the name, title and mailing address for your county election board members.

| Title | Name | Party Name | Address & Street | City, State, and Zip | E-mail Address | Phone Number |
|---------------------------------------|-----------------|------------|----------------------|----------------------|-----------------------------------|--------------|
| Clerk/Secretary of the Election Board | SHERRY L. BROWN | CLERK | 300 N CAPITOL AVENUE | CORYDON IN 47112 | sherrybrown@harrisoncounty.in.gov | 812-738-4289 |
| Election Board Chairman | MARYLAND AUSTIN | REPUBLICAN | 300 N CAPITOL AVENUE | CORYDON IN 47112 | sherrybrown@harrisoncounty.in.gov | 812-738-4289 |
| Election Board Member | NATHANIEL ADAMS | Democratic | 300 N CAPITOL AVENUE | CORYDON IN 47112 | sherrybrown@harrisoncounty.in.gov | 8127384289 |
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CEB 9 Summary

Hendricks County

REGISTRATION AND TURNOUT:

1. Number of registered voters in **county** for this election (Note: If the election was held only in part of the county, the number of registered voters in that part of the county for this election): **124622**
2. Number of voters voting *in person at the polls on Election Day*: **11589**
3. Number of all voters voting *absentee including by mail, travel board, in-person, and military and overseas (UOCAVA)*: **3672**
4. Total number of voters who voted in this election (auto-calculated as #2 + #3): **15261**

ABSENTEE VOTING

5. Please enter the number of absentee ballots that were rejected (exclude UOCAVA): **7**
- 5(a). Please enter the number of absentee ballots Not Received (Not returned to your county by the deadline): **119**

UOCAVA (Voters using the Federal Postcard Application and Federal Write-In Absentee Ballots)

6. The combined total number of absentee ballots sent by county to military and overseas voters: **12**
7. Total number of ballots in #6 returned by these voters. (Include any Federal Write-In Absentee Ballots, counted, because a UOCAVA did not return an official county ballot.): **10**
8. Total number of ballots in #7 counted: **10**

PROVISIONAL BALLOTS:

9. Total number of provisional ballots counted by county election board: **11**
10. Total number of provisional ballots not counted by county election board: **4**
11. The total number of provisional ballots cast by voters in the county in this election (System calculated as #9 + #10): **15**

ELECTION BUDGET AND EQUIPMENT:

12. BUDGETED cost for this election. Estimate if necessary: **80,000.00**
- 13(a). Provide the following information for the Election System Type:

| Election System Type | System Service Manufacturer | Voting System Model |
|-------------------------------------|-----------------------------|---------------------|
| Direct Recording Electronic Voting | MicroVote | EMS 4.4 |
| Optical Scan Ballot Tabulator | MicroVote | EMS 4.4 |
| ADA Compliant Ballot Marking Device | MicroVote | EMS 4.4 |
| Election Management System | MicroVote | EMS 4.4 |
| Hand Counted Paper Ballot | NO | |

- 13(b). Name the System Service Manufacturer used by the County in this Election **MicroVote**

- 13(c). Describe any discrepancies with your voting system during the election if your County:
none

- 13(d). Name the Election Pollbook system service provider and the system model used by the county in this election:

| System Service Provider | System Model Number(s) |
|-------------------------|------------------------|
| KNOWiNK LLC | PollPad 3.0.1 |

- 13(e). Name the EPB System Service Manufacturer used by the County in this Election: **KNOWiNK LLC**

CEB 9 Summary

ENCLOSURES:

14(a). Describe any malfunction or other problem with your voting system during the election. If your county did not experience any problems, please input "None" in the text box below. **none**

14(b). If you will be sending additional information on the malfunctions to IED, how will it be sent? **No Malfunction**

15. How will you be submitting Certified & Final Precinct Level Results for your county to IED? (Please use the Voter Status Counts by Precinct and Split report from SVRS): **Electronic Submission**

16. If you will be sending any additional information to the Election Division, how will it be sent? **Electronic Submission**

17. Please enter the name, title and mailing address for your county election board members.

| Title | Name | Party Name | Address & Street | City, State, and Zip | E-mail Address | Phone Number |
|---------------------------------------|---------------|------------|-----------------------------|------------------------|--------------------------|--------------|
| Clerk/Secretary of the Election Board | MARJORIE PIKE | Republican | 355 S WASHINGTON ST STE 120 | DANVILLE IN 46122-1798 | mpike@co.hendricks.in.us | 317-745-9451 |
| Election Board Chairman | SCOTT KNIERIM | Republican | 355 S WASHINGTON ST STE 120 | DANVILLE IN 46122-1798 | scottnierim@yahoo.com | 317-544-0952 |
| Election Board Member | JAMES ROWINGS | Democratic | 355 S WASHINGTON ST STE 120 | DANVILLE IN 46122-1798 | james@hinkle-law.com | 317-600-1703 |
| | | | | | | |
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CEB 9 Summary

Henry County

REGISTRATION AND TURNOUT:

1. Number of registered voters in **county** for this election (Note: If the election was held only in part of the county, the number of registered voters in that part of the county for this election): **30988**
2. Number of voters voting *in person at the polls on Election Day*: **5865**
3. Number of all voters voting *absentee including by mail, travel board, in-person, and military and overseas (UOCAVA)*: **1203**
4. Total number of voters who voted in this election (auto-calculated as #2 + #3): **7068**

ABSENTEE VOTING

5. Please enter the number of absentee ballots that were rejected (exclude UOCAVA): **28**
- 5(a). Please enter the number of absentee ballots Not Received (Not returned to your county by the deadline): **16**

UOCAVA (Voters using the Federal Postcard Application and Federal Write-In Absentee Ballots)

6. The combined total number of absentee ballots sent by county to military and overseas voters: **1**
7. Total number of ballots in #6 returned by these voters. (Include any Federal Write-In Absentee Ballots, counted, because a UOCAVA did not return an official county ballot.): **0**
8. Total number of ballots in #7 counted: **0**

PROVISIONAL BALLOTS:

9. Total number of provisional ballots counted by county election board: **1**
10. Total number of provisional ballots not counted by county election board: **0**
11. The total number of provisional ballots cast by voters in the county in this election (System calculated as #9 + #10): **1**

ELECTION BUDGET AND EQUIPMENT:

12. BUDGETED cost for this election. Estimate if necessary: **80,000.00**
- 13(a). Provide the following information for the Election System Type:

| Election System Type | System Service Manufacturer | Voting System Model |
|-------------------------------------|-----------------------------|---------------------|
| Direct Recording Electronic Voting | N/A | N/A |
| Optical Scan Ballot Tabulator | ES&S | EVS 5.2.2.0 |
| ADA Compliant Ballot Marking Device | ES&S | EVS 5.2.2.0 |
| Election Management System | ES&S | EVS 5.2.2.0 |
| Hand Counted Paper Ballot | NO | |

- 13(b). Name the System Service Manufacturer used by the County in this Election **ES&S**

- 13(c). Describe any discrepancies with your voting system during the election if your County:

None

- 13(d). Name the Election Pollbook system service provider and the system model used by the county in this election:

| System Service Provider | System Model Number(s) |
|-------------------------|------------------------|
| KNOWiNK LLC | PollPad 2.3.7 |

- 13(e). Name the EPB System Service Manufacturer used by the County in this Election: **KNOWiNK LLC**

CEB 9 Summary

ENCLOSURES:

14(a). Describe any malfunction or other problem with your voting system during the election. If your county did not experience any problems, please input "None" in the text box below. **None**

14(b). If you will be sending additional information on the malfunctions to IED, how will it be sent? **No Malfunction**

15. How will you be submitting Certified & Final Precinct Level Results for your county to IED? (Please use the Voter Status Counts by Precinct and Split report from SVRS): **Email**

16. If you will be sending any additional information to the Election Division, how will it be sent? **Email**

17. Please enter the name, title and mailing address for your county election board members.

| Title | Name | Party Name | Address & Street | City, State, and Zip | E-mail Address | Phone Number |
|---------------------------------------|-----------------|------------|------------------------|----------------------|------------------------------|--------------|
| Clerk/Secretary of the Election Board | JENNIFER GRUBBS | Republican | 1215 RACE ST SUITE 130 | NEW CASTLE IN 47362 | elections@henrycounty.in.gov | 7655299310 |
| Election Board Chairman | BUTCH BAKER | Republican | 1215 RACE ST SUITE 130 | NEW CASTLE IN 47362 | elections@henrycounty.in.gov | 7655299310 |
| Election Board Member | ALLAN BRAMLETT | Democratic | 1215 RACE ST SUITE 130 | NEW CASTLE IN 47362 | elections@henrycounty.in.gov | 7655299310 |
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CEB 9 Summary

Howard County

REGISTRATION AND TURNOUT:

1. Number of registered voters in **county** for this election (Note: If the election was held only in part of the county, the number of registered voters in that part of the county for this election): **60454**
2. Number of voters voting *in person at the polls on Election Day*: **4866**
3. Number of all voters voting *absentee including by mail, travel board, in-person, and military and overseas (UOCAVA)*: **2136**
4. Total number of voters who voted in this election (auto-calculated as #2 + #3): **7002**

ABSENTEE VOTING

5. Please enter the number of absentee ballots that were rejected (exclude UOCAVA): **15**
- 5(a). Please enter the number of absentee ballots Not Received (Not returned to your county by the deadline): **6**

UOCAVA (Voters using the Federal Postcard Application and Federal Write-In Absentee Ballots)

6. The combined total number of absentee ballots sent by county to military and overseas voters: **3**
7. Total number of ballots in #6 returned by these voters. (Include any Federal Write-In Absentee Ballots, counted, because a UOCAVA did not return an official county ballot.): **3**
8. Total number of ballots in #7 counted: **3**

PROVISIONAL BALLOTS:

9. Total number of provisional ballots counted by county election board: **18**
10. Total number of provisional ballots not counted by county election board: **16**
11. The total number of provisional ballots cast by voters in the county in this election (System calculated as #9 + #10): **34**

ELECTION BUDGET AND EQUIPMENT:

12. BUDGETED cost for this election. Estimate if necessary: **100,000.00**
- 13(a). Provide the following information for the Election System Type:

| Election System Type | System Service Manufacturer | Voting System Model |
|-------------------------------------|-----------------------------|----------------------|
| Direct Recording Electronic Voting | N/A | N/A |
| Optical Scan Ballot Tabulator | ES&S | EVS 6.0.4.0 |
| ADA Compliant Ballot Marking Device | ES&S | EVS 6.0.4.0 |
| Election Management System | ES&S | Electionware 5.0.4.0 |
| Hand Counted Paper Ballot | NO | |

- 13(b). Name the System Service Manufacturer used by the County in this Election **ES&S**

- 13(c). Describe any discrepancies with your voting system during the election if your County:
NONE

- 13(d). Name the Election Pollbook system service provider and the system model used by the county in this election:

| System Service Provider | System Model Number(s) |
|-------------------------|------------------------|
| ES&S | EZRoster 3.7.0.0 |

- 13(e). Name the EPB System Service Manufacturer used by the County in this Election: **ES&S**

CEB 9 Summary

ENCLOSURES:

14(a). Describe any malfunction or other problem with your voting system during the election. If your county did not experience any problems, please input "None" in the text box below. **None**

14(b). If you will be sending additional information on the malfunctions to IED, how will it be sent? **No Malfunction**

15. How will you be submitting Certified & Final Precinct Level Results for your county to IED? (Please use the Voter Status Counts by Precinct and Split report from SVRS): **Email**

16. If you will be sending any additional information to the Election Division, how will it be sent? **Email**

17. Please enter the name, title and mailing address for your county election board members.

| Title | Name | Party Name | Address & Street | City, State, and Zip | E-mail Address | Phone Number |
|---------------------------------------|----------------|------------|-------------------------|----------------------|-----------------------------------|--------------|
| Clerk/Secretary of the Election Board | DEBBIE STEWART | Republican | 120 E MULBERRY ROOM 102 | KOKOMO IN 46901 | debbie.stewart@howardcountyin.gov | 7656143220 |
| Election Board Chairman | PHIL THURSTON | Republican | 120 E MULBERRY ROOM 102 | KOKOMO IN 46901 | pthurston806@gmail.com | 7656143220 |
| Election Board Member | DERICK STEELE | DEMOCRATIC | 120 E MULBERRY ROOM 102 | KOKOMO IN 46901 | attysteelervs@gmail.com | 7656143220 |
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CEB 9 Summary

Huntington County

REGISTRATION AND TURNOUT:

1. Number of registered voters in **county** for this election (Note: If the election was held only in part of the county, the number of registered voters in that part of the county for this election): **24071**
2. Number of voters voting *in person at the polls on Election Day*: **3171**
3. Number of all voters voting *absentee including by mail, travel board, in-person, and military and overseas (UOCAVA)*: **1603**
4. Total number of voters who voted in this election (auto-calculated as #2 + #3): **4774**

ABSENTEE VOTING

5. Please enter the number of absentee ballots that were rejected (exclude UOCAVA): **1**
- 5(a). Please enter the number of absentee ballots Not Received (Not returned to your county by the deadline): **30**

UOCAVA (Voters using the Federal Postcard Application and Federal Write-In Absentee Ballots)

6. The combined total number of absentee ballots sent by county to military and overseas voters: **0**
7. Total number of ballots in #6 returned by these voters. (Include any Federal Write-In Absentee Ballots, counted, because a UOCAVA did not return an official county ballot.): **0**
8. Total number of ballots in #7 counted: **0**

PROVISIONAL BALLOTS:

9. Total number of provisional ballots counted by county election board: **0**
10. Total number of provisional ballots not counted by county election board: **0**
11. The total number of provisional ballots cast by voters in the county in this election (System calculated as #9 + #10): **0**

ELECTION BUDGET AND EQUIPMENT:

12. BUDGETED cost for this election. Estimate if necessary: **75,708**
- 13(a). Provide the following information for the Election System Type:

| Election System Type | System Service Manufacturer | Voting System Model |
|-------------------------------------|-----------------------------|---------------------|
| Direct Recording Electronic Voting | MicroVote | EMS 4.4 |
| Optical Scan Ballot Tabulator | MicroVote | EMS 4.4 |
| ADA Compliant Ballot Marking Device | N/A | N/A |
| Election Management System | MicroVote | EMS 4.4 |
| Hand Counted Paper Ballot | NO | |

13(b). Name the System Service Manufacturer used by the County in this Election **MicroVote**

13(c). Describe any discrepancies with your voting system during the election if your County:

None

13(d). Name the Election Pollbook system service provider and the system model used by the county in this election:

| System Service Provider | System Model Number(s) |
|-------------------------|------------------------|
| KNOWiNK LLC | PollPad 2.5 |

13(e). Name the EPB System Service Manufacturer used by the County in this Election: **KNOWiNK LLC**

CEB 9 Summary

ENCLOSURES:

14(a). Describe any malfunction or other problem with your voting system during the election. If your county did not experience any problems, please input "None" in the text box below. **None**

14(b). If you will be sending additional information on the malfunctions to IED, how will it be sent? **USPS or Courier**

15. How will you be submitting Certified & Final Precinct Level Results for your county to IED? (Please use the Voter Status Counts by Precinct and Split report from SVRS): **Electronic Submission**

16. If you will be sending any additional information to the Election Division, how will it be sent? **USPS or Courier**

17. Please enter the name, title and mailing address for your county election board members.

| Title | Name | Party Name | Address & Street | City, State, and Zip | E-mail Address | Phone Number |
|---------------------------------------|----------------|------------|------------------|----------------------|---------------------------------|--------------|
| Clerk/Secretary of the Election Board | SHELLEY SEPTER | Republican | PO BOX 228 | HUNTINGTON IN 46750 | shelley.septer@huntington.in.us | 2603564817 |
| Election Board Member | CYNTHIA HYDE | Democratic | PO BOX 228 | HUNTINGTON IN 46750 | cynthia.hyde@huntington.in.us | 8128211229 |
| Election Board Chairman | LORI GUY | Republican | PO BOX 228 | HUNTINGTON IN 46750 | LORIGUY1959@GMAIL.COM | 2603883333 |
| | | | | | | |
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CEB 9 Summary

Jackson County

REGISTRATION AND TURNOUT:

1. Number of registered voters in **county** for this election (Note: If the election was held only in part of the county, the number of registered voters in that part of the county for this election): **28314**
2. Number of voters voting *in person at the polls on Election Day*: **3463**
3. Number of all voters voting *absentee including by mail, travel board, in-person, and military and overseas (UOCAVA)*: **1208**
4. Total number of voters who voted in this election (auto-calculated as #2 + #3): **4671**

ABSENTEE VOTING

5. Please enter the number of absentee ballots that were rejected (exclude UOCAVA): **1**
- 5(a). Please enter the number of absentee ballots Not Received (Not returned to your county by the deadline): **1**

UOCAVA (Voters using the Federal Postcard Application and Federal Write-In Absentee Ballots)

6. The combined total number of absentee ballots sent by county to military and overseas voters: **0**
7. Total number of ballots in #6 returned by these voters. (Include any Federal Write-In Absentee Ballots, counted, because a UOCAVA did not return an official county ballot.): **0**
8. Total number of ballots in #7 counted: **0**

PROVISIONAL BALLOTS:

9. Total number of provisional ballots counted by county election board: **29**
10. Total number of provisional ballots not counted by county election board: **13**
11. The total number of provisional ballots cast by voters in the county in this election (System calculated as #9 + #10): **42**

ELECTION BUDGET AND EQUIPMENT:

12. BUDGETED cost for this election. Estimate if necessary: **101,981.00**
- 13(a). Provide the following information for the Election System Type:

| Election System Type | System Service Manufacturer | Voting System Model |
|-------------------------------------|-----------------------------|---------------------|
| Direct Recording Electronic Voting | Unisyn | OpenElect 2.0A |
| Optical Scan Ballot Tabulator | Unisyn | OpenElect 2.0A |
| ADA Compliant Ballot Marking Device | Unisyn | OpenElect 2.0A |
| Election Management System | Unisyn | OpenElect 2.0A |
| Hand Counted Paper Ballot | NO | |

- 13(b). Name the System Service Manufacturer used by the County in this Election **RBM**

- 13(c). Describe any discrepancies with your voting system during the election if your County:

None

- 13(d). Name the Election Pollbook system service provider and the system model used by the county in this election:

| System Service Provider | System Model Number(s) |
|-------------------------|------------------------|
| VR Systems | EVid Next MH-5100 |

- 13(e). Name the EPB System Service Manufacturer used by the County in this Election: **VR Systems**

CEB 9 Summary

ENCLOSURES:

14(a). Describe any malfunction or other problem with your voting system during the election. If your county did not experience any problems, please input "None" in the text box below. **There was a programming issue. Fixed very quickly. Election went on as normal and no issues the rest of the day.**

14(b). If you will be sending additional information on the malfunctions to IED, how will it be sent? **Email**

15. How will you be submitting Certified & Final Precinct Level Results for your county to IED? (Please use the Voter Status Counts by Precinct and Split report from SVRS): **Electronic Submission**

16. If you will be sending any additional information to the Election Division, how will it be sent? **Email**

17. Please enter the name, title and mailing address for your county election board members.

| Title | Name | Party Name | Address & Street | City, State, and Zip | E-mail Address | Phone Number |
|---------------------------------------|----------------|------------|---------------------------------|----------------------|-----------------------------|--------------|
| Clerk/Secretary of the Election Board | MELISSA HAYES | Republican | 109 S SUGAR ST, CLERK SUITE 130 | BROWNSTOWN IN 47220 | mhayes@jacksoncounty.in.gov | 8125259409 |
| Election Board Member | MELISSA ACTON | Republican | 109 S SUGAR ST, CLERK SUITE 130 | BROWNSTOWN IN 47220 | melzacton@gmail.com | 8125690135 |
| Election Board Member | JULIE ROLHFING | Democratic | 109 S SUGAR ST, CLERK SUITE 130 | BROWNSTOWN IN 47220 | therohlfingfamily@gmail.com | 8125259409 |
| | | | | | | |
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CEB 9 Summary

Jasper County

REGISTRATION AND TURNOUT:

1. Number of registered voters in **county** for this election (Note: If the election was held only in part of the county, the number of registered voters in that part of the county for this election): **22839**
2. Number of voters voting *in person at the polls on Election Day*: **3248**
3. Number of all voters voting *absentee including by mail, travel board, in-person, and military and overseas (UOCAVA)*: **739**
4. Total number of voters who voted in this election (auto-calculated as #2 + #3): **3987**

ABSENTEE VOTING

5. Please enter the number of absentee ballots that were rejected (exclude UOCAVA): **0**
- 5(a). Please enter the number of absentee ballots Not Received (Not returned to your county by the deadline): **26**

UOCAVA (Voters using the Federal Postcard Application and Federal Write-In Absentee Ballots)

6. The combined total number of absentee ballots sent by county to military and overseas voters: **1**
7. Total number of ballots in #6 returned by these voters. (Include any Federal Write-In Absentee Ballots, counted, because a UOCAVA did not return an official county ballot.): **1**
8. Total number of ballots in #7 counted: **1**

PROVISIONAL BALLOTS:

9. Total number of provisional ballots counted by county election board: **0**
10. Total number of provisional ballots not counted by county election board: **0**
11. The total number of provisional ballots cast by voters in the county in this election (System calculated as #9 + #10): **0**

ELECTION BUDGET AND EQUIPMENT:

12. BUDGETED cost for this election. Estimate if necessary: **51,578.64**
- 13(a). Provide the following information for the Election System Type:

| Election System Type | System Service Manufacturer | Voting System Model |
|-------------------------------------|-----------------------------|---------------------|
| Direct Recording Electronic Voting | MicroVote | EMS 4.4 |
| Optical Scan Ballot Tabulator | MicroVote | EMS 4.4 |
| ADA Compliant Ballot Marking Device | MicroVote | EMS 4.4 |
| Election Management System | MicroVote | EMS 4.4 |
| Hand Counted Paper Ballot | NO | |

- 13(b). Name the System Service Manufacturer used by the County in this Election **MicroVote**

- 13(c). Describe any discrepancies with your voting system during the election if your County:

None

- 13(d). Name the Election Pollbook system service provider and the system model used by the county in this election:

| System Service Provider | System Model Number(s) |
|-------------------------|------------------------|
| KNOWiNK LLC | PollPad 2.5 |

- 13(e). Name the EPB System Service Manufacturer used by the County in this Election: **KNOWiNK LLC**

CEB 9 Summary

ENCLOSURES:

14(a). Describe any malfunction or other problem with your voting system during the election. If your county did not experience any problems, please input "None" in the text box below. **None**

14(b). If you will be sending additional information on the malfunctions to IED, how will it be sent? **No Malfunction**

15. How will you be submitting Certified & Final Precinct Level Results for your county to IED? (Please use the Voter Status Counts by Precinct and Split report from SVRS): **Electronic Submission**

16. If you will be sending any additional information to the Election Division, how will it be sent? **Email**

17. Please enter the name, title and mailing address for your county election board members.

| Title | Name | Party Name | Address & Street | City, State, and Zip | E-mail Address | Phone Number |
|---------------------------------------|------------------|------------|------------------------------------|----------------------|-------------------------------|--------------|
| Clerk/Secretary of the Election Board | KARA FISHBURN | Republican | 115 W WASHINGTON STREET, SUITE 204 | RENSSELAER IN 47978 | kara.fishburn@co.jasper.in.us | 219-866-4927 |
| Election Board Chairman | JEFFREY PHILLIPS | Republican | 115 W WASHINGTON STREET, SUITE 204 | RENSSELAER IN 47978 | jspiiifc@gmail.com | 219-863-0546 |
| Election Board Member | MICHAEL WHEELER | Democrat | 115 W WASHINGTON STREET, SUITE 204 | RENSSELAER IN 47978 | chairmikewheeler@gmail.com | 219-916-4610 |
| | | | | | | |
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CEB 9 Summary

Jay County

REGISTRATION AND TURNOUT:

1. Number of registered voters in **county** for this election (Note: If the election was held only in part of the county, the number of registered voters in that part of the county for this election): **12191**
2. Number of voters voting *in person at the polls on Election Day*: **2271**
3. Number of all voters voting *absentee including by mail, travel board, in-person, and military and overseas (UOCAVA)*: **1149**
4. Total number of voters who voted in this election (auto-calculated as #2 + #3): **3420**

ABSENTEE VOTING

5. Please enter the number of absentee ballots that were rejected (exclude UOCAVA): **0**
- 5(a). Please enter the number of absentee ballots Not Received (Not returned to your county by the deadline): **0**

UOCAVA (Voters using the Federal Postcard Application and Federal Write-In Absentee Ballots)

6. The combined total number of absentee ballots sent by county to military and overseas voters: **0**
7. Total number of ballots in #6 returned by these voters. (Include any Federal Write-In Absentee Ballots, counted, because a UOCAVA did not return an official county ballot.): **0**
8. Total number of ballots in #7 counted: **0**

PROVISIONAL BALLOTS:

9. Total number of provisional ballots counted by county election board: **0**
10. Total number of provisional ballots not counted by county election board: **0**
11. The total number of provisional ballots cast by voters in the county in this election (System calculated as #9 + #10): **0**

ELECTION BUDGET AND EQUIPMENT:

12. BUDGETED cost for this election. Estimate if necessary: **35,000**
- 13(a). Provide the following information for the Election System Type:

| Election System Type | System Service Manufacturer | Voting System Model |
|-------------------------------------|-----------------------------|---------------------|
| Direct Recording Electronic Voting | MicroVote | EMS 4.4 |
| Optical Scan Ballot Tabulator | MicroVote | EMS 4.4 |
| ADA Compliant Ballot Marking Device | MicroVote | EMS 4.4 |
| Election Management System | MicroVote | EMS 4.4 |
| Hand Counted Paper Ballot | NO | |

13(b). Name the System Service Manufacturer used by the County in this Election **MicroVote**

13(c). Describe any discrepancies with your voting system during the election if your County:
none

13(d). Name the Election Pollbook system service provider and the system model used by the county in this election:

| System Service Provider | System Model Number(s) |
|-------------------------|------------------------|
| KNOWiNK LLC | PollPad 2.3.7 |

13(e). Name the EPB System Service Manufacturer used by the County in this Election: **KNOWiNK LLC**

CEB 9 Summary

ENCLOSURES:

14(a). Describe any malfunction or other problem with your voting system during the election. If your county did not experience any problems, please input "None" in the text box below. **None**

14(b). If you will be sending additional information on the malfunctions to IED, how will it be sent? **No Malfunction**

15. How will you be submitting Certified & Final Precinct Level Results for your county to IED? (Please use the Voter Status Counts by Precinct and Split report from SVRS): **Electronic Submission**

16. If you will be sending any additional information to the Election Division, how will it be sent? **Electronic Submission**

17. Please enter the name, title and mailing address for your county election board members.

| Title | Name | Party Name | Address & Street | City, State, and Zip | E-mail Address | Phone Number |
|---------------------------------------|-----------------|------------|------------------|----------------------|----------------------|--------------|
| Clerk/Secretary of the Election Board | JON EADS | Republican | 415 E Votaw St | Portland, IN 47371 | jeads@co.jay.in.us | 260-726-6915 |
| Election Board Chairman | CARMEN CRAIG | Republican | 304 E North St | Portland, IN 47371 | ccraig@co.jay.in.us | 260-726-6990 |
| Election Board Member | DANE A MUMBOWER | Democratic | 10586 W 200 N | Dunkirk, IN 47336 | dmumbower1@gmail.com | 765-748-9569 |
| | | | | | | |
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CEB 9 Summary

Jefferson County

REGISTRATION AND TURNOUT:

1. Number of registered voters in **county** for this election (Note: If the election was held only in part of the county, the number of registered voters in that part of the county for this election): **21849**
2. Number of voters voting *in person at the polls on Election Day*: **3111**
3. Number of all voters voting *absentee including by mail, travel board, in-person, and military and overseas (UOCAVA)*: **915**
4. Total number of voters who voted in this election (auto-calculated as #2 + #3): **4026**

ABSENTEE VOTING

5. Please enter the number of absentee ballots that were rejected (exclude UOCAVA): **0**
- 5(a). Please enter the number of absentee ballots Not Received (Not returned to your county by the deadline): **20**

UOCAVA (Voters using the Federal Postcard Application and Federal Write-In Absentee Ballots)

6. The combined total number of absentee ballots sent by county to military and overseas voters: **4**
7. Total number of ballots in #6 returned by these voters. (Include any Federal Write-In Absentee Ballots, counted, because a UOCAVA did not return an official county ballot.): **4**
8. Total number of ballots in #7 counted: **4**

PROVISIONAL BALLOTS:

9. Total number of provisional ballots counted by county election board: **0**
10. Total number of provisional ballots not counted by county election board: **1**
11. The total number of provisional ballots cast by voters in the county in this election (System calculated as #9 + #10): **1**

ELECTION BUDGET AND EQUIPMENT:

12. BUDGETED cost for this election. Estimate if necessary: **80,000.00**
- 13(a). Provide the following information for the Election System Type:

| Election System Type | System Service Manufacturer | Voting System Model |
|-------------------------------------|-----------------------------|---------------------|
| Direct Recording Electronic Voting | MicroVote | EMS 4.4 |
| Optical Scan Ballot Tabulator | MicroVote | EMS 4.4 |
| ADA Compliant Ballot Marking Device | MicroVote | EMS 4.4 |
| Election Management System | MicroVote | EMS 4.4 |
| Hand Counted Paper Ballot | YES | |

- 13(b). Name the System Service Manufacturer used by the County in this Election **MicroVote**

- 13(c). Describe any discrepancies with your voting system during the election if your County:

NONE

- 13(d). Name the Election Pollbook system service provider and the system model used by the county in this election:

| System Service Provider | System Model Number(s) |
|-------------------------|------------------------|
| KNOWiNK LLC | PollPad 3.0.1 |

- 13(e). Name the EPB System Service Manufacturer used by the County in this Election: **KNOWiNK LLC**

CEB 9 Summary

ENCLOSURES:

14(a). Describe any malfunction or other problem with your voting system during the election. If your county did not experience any problems, please input "None" in the text box below. **Machine #2107 had a fatal error. The techs along with MicroVote were able to retrieve the votes from it.**

14(b). If you will be sending additional information on the malfunctions to IED, how will it be sent? **Email**

15. How will you be submitting Certified & Final Precinct Level Results for your county to IED? (Please use the Voter Status Counts by Precinct and Split report from SVRS): **Electronic Submission**

16. If you will be sending any additional information to the Election Division, how will it be sent? **Email**

17. Please enter the name, title and mailing address for your county election board members.

| Title | Name | Party Name | Address & Street | City, State, and Zip | E-mail Address | Phone Number |
|---------------------------------------|----------------|------------|--------------------|----------------------|--------------------------------------|--------------|
| Clerk/Secretary of the Election Board | TABATHA EBLEN | Republican | 300 E MAIN ST #203 | MADISON IN 47250 | tabatha.eblen@jeffersoncounty.in.gov | 812-265-8924 |
| Election Board Chairman | MINDY MCGEE | Republican | 300 E MAIN ST #203 | MADISON IN 47250 | mindykmcgee@gmail.com | 812-390-7050 |
| Election Board Member | MERRITT ALCORN | Democratic | 300 E MAIN ST #203 | MADISON IN 47250 | alcorn@advocatelawoffices.com | 812-599-0087 |
| | | | | | | |
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CEB 9 Summary

Jennings County

REGISTRATION AND TURNOUT:

1. Number of registered voters in **county** for this election (Note: If the election was held only in part of the county, the number of registered voters in that part of the county for this election): **18176**
2. Number of voters voting *in person at the polls on Election Day*: **2621**
3. Number of all voters voting *absentee including by mail, travel board, in-person, and military and overseas (UOCAVA)*: **380**
4. Total number of voters who voted in this election (auto-calculated as #2 + #3): **3001**

ABSENTEE VOTING

5. Please enter the number of absentee ballots that were rejected (exclude UOCAVA): **1**
- 5(a). Please enter the number of absentee ballots Not Received (Not returned to your county by the deadline): **17**

UOCAVA (Voters using the Federal Postcard Application and Federal Write-In Absentee Ballots)

6. The combined total number of absentee ballots sent by county to military and overseas voters: **3**
7. Total number of ballots in #6 returned by these voters. (Include any Federal Write-In Absentee Ballots, counted, because a UOCAVA did not return an official county ballot.): **2**
8. Total number of ballots in #7 counted: **2**

PROVISIONAL BALLOTS:

9. Total number of provisional ballots counted by county election board: **1**
10. Total number of provisional ballots not counted by county election board: **8**
11. The total number of provisional ballots cast by voters in the county in this election (System calculated as #9 + #10): **9**

ELECTION BUDGET AND EQUIPMENT:

12. BUDGETED cost for this election. Estimate if necessary: **105,338.00**
- 13(a). Provide the following information for the Election System Type:

| Election System Type | System Service Manufacturer | Voting System Model |
|-------------------------------------|-----------------------------|---------------------|
| Direct Recording Electronic Voting | N/A | N/A |
| Optical Scan Ballot Tabulator | ES&S | Unity 3.0.1.0 |
| ADA Compliant Ballot Marking Device | ES&S | Unity 3.0.1.0 |
| Election Management System | ES&S | Unity 3.0.1.0 |
| Hand Counted Paper Ballot | NO | |

- 13(b). Name the System Service Manufacturer used by the County in this Election **ES&S**

- 13(c). Describe any discrepancies with your voting system during the election if your County:

None

- 13(d). Name the Election Pollbook system service provider and the system model used by the county in this election:

| System Service Provider | System Model Number(s) |
|-------------------------|------------------------|
| KNOWiNK LLC | PollPad 3.0 |

- 13(e). Name the EPB System Service Manufacturer used by the County in this Election: **KNOWiNK LLC**

CEB 9 Summary

ENCLOSURES:

- 14(a). Describe any malfunction or other problem with your voting system during the election. If your county did not experience any problems, please input "None" in the text box below. **One of the DS200 machines would not accept ballots. Site support determined that one of the cameras was out. Machine was replaced.**
- 14(b). If you will be sending additional information on the malfunctions to IED, how will it be sent? **Email**
15. How will you be submitting Certified & Final Precinct Level Results for your county to IED? (Please use the Voter Status Counts by Precinct and Split report from SVRS): **Electronic Submission**
16. If you will be sending any additional information to the Election Division, how will it be sent? **Email**
17. Please enter the name, title and mailing address for your county election board members.

| Title | Name | Party Name | Address & Street | City, State, and Zip | E-mail Address | Phone Number |
|---------------------------------------|---------------|------------|------------------|----------------------|---------------------------------|--------------|
| Clerk/Secretary of the Election Board | AMY THOMPSON | Republican | PO BOX 385 | VERNON IN 47282 | athompson@jenningscounty-in.gov | 812-352-3080 |
| Election Board Chairman | JASON JUDD | Republican | PO BOX 385 | VERNON IN 47282 | jjudd@wjennerlaw.net | 812-352-3080 |
| Election Board Member | ANDREW KELLEY | Democratic | PO BOX 385 | VERNON IN 47282 | emrysfevre@gmail.com | 812-352-3080 |
| | | | | | | |
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CEB 9 Summary

Johnson County

REGISTRATION AND TURNOUT:

1. Number of registered voters in **county** for this election (Note: If the election was held only in part of the county, the number of registered voters in that part of the county for this election): **115213**
2. Number of voters voting *in person at the polls on Election Day*: **9722**
3. Number of all voters voting *absentee including by mail, travel board, in-person, and military and overseas (UOCAVA)*: **4353**
4. Total number of voters who voted in this election (auto-calculated as #2 + #3): **14075**

ABSENTEE VOTING

5. Please enter the number of absentee ballots that were rejected (exclude UOCAVA): **16**
- 5(a). Please enter the number of absentee ballots Not Received (Not returned to your county by the deadline): **146**

UOCAVA (Voters using the Federal Postcard Application and Federal Write-In Absentee Ballots)

6. The combined total number of absentee ballots sent by county to military and overseas voters: **15**
7. Total number of ballots in #6 returned by these voters. (Include any Federal Write-In Absentee Ballots, counted, because a UOCAVA did not return an official county ballot.): **15**
8. Total number of ballots in #7 counted: **15**

PROVISIONAL BALLOTS:

9. Total number of provisional ballots counted by county election board: **5**
10. Total number of provisional ballots not counted by county election board: **5**
11. The total number of provisional ballots cast by voters in the county in this election (System calculated as #9 + #10): **10**

ELECTION BUDGET AND EQUIPMENT:

12. BUDGETED cost for this election. Estimate if necessary: **200,000**
- 13(a). Provide the following information for the Election System Type:

| Election System Type | System Service Manufacturer | Voting System Model |
|-------------------------------------|-----------------------------|---------------------|
| Direct Recording Electronic Voting | MicroVote | EMS 4.4 |
| Optical Scan Ballot Tabulator | MicroVote | EMS 4.4 |
| ADA Compliant Ballot Marking Device | MicroVote | EMS 4.4 |
| Election Management System | MicroVote | EMS 4.4 |
| Hand Counted Paper Ballot | NO | |

- 13(b). Name the System Service Manufacturer used by the County in this Election **KNOWiNK LLC**

- 13(c). Describe any discrepancies with your voting system during the election if your County:

None

- 13(d). Name the Election Pollbook system service provider and the system model used by the county in this election:

| System Service Provider | System Model Number(s) |
|-------------------------|------------------------|
| KNOWiNK LLC | PollPad 3.0.1 |

- 13(e). Name the EPB System Service Manufacturer used by the County in this Election: **MicroVote**

CEB 9 Summary

ENCLOSURES:

14(a). Describe any malfunction or other problem with your voting system during the election. If your county did not experience any problems, please input "None" in the text box below. **None**

14(b). If you will be sending additional information on the malfunctions to IED, how will it be sent? **No Malfunction**

15. How will you be submitting Certified & Final Precinct Level Results for your county to IED? (Please use the Voter Status Counts by Precinct and Split report from SVRS): **Electronic Submission**

16. If you will be sending any additional information to the Election Division, how will it be sent? **USPS or Courier**

17. Please enter the name, title and mailing address for your county election board members.

| Title | Name | Party Name | Address & Street | City, State, and Zip | E-mail Address | Phone Number |
|---------------------------------------|------------------|------------|------------------|------------------------|----------------------------------|--------------|
| Clerk/Secretary of the Election Board | TRENA MCLAUGHLIN | Republican | P.O. BOX 451 | FRANKLIN IN 46131-0451 | trenamclaughlin@co.johnson.in.us | 317-346-4463 |
| Election Board Chairman | PHIL BARROW | Republican | P.O. BOX 451 | FRANKLIN IN 46131-0451 | pbarrow@aol.com | 317-736-1437 |
| Election Board Member | R KEVIN SERVICE | Democratic | P.O. BOX 451 | FRANKLIN IN 46131-0451 | rkservice57@yahoo.com | 812-552-1164 |
| | | | | | | |
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CEB 9 Summary

Knox County

REGISTRATION AND TURNOUT:

1. Number of registered voters in **county** for this election (Note: If the election was held only in part of the county, the number of registered voters in that part of the county for this election): **22088**
2. Number of voters voting *in person at the polls on Election Day*: **3549**
3. Number of all voters voting *absentee including by mail, travel board, in-person, and military and overseas (UOCAVA)*: **1735**
4. Total number of voters who voted in this election (auto-calculated as #2 + #3): **5284**

ABSENTEE VOTING

5. Please enter the number of absentee ballots that were rejected (exclude UOCAVA): **0**
- 5(a). Please enter the number of absentee ballots Not Received (Not returned to your county by the deadline): **79**

UOCAVA (Voters using the Federal Postcard Application and Federal Write-In Absentee Ballots)

6. The combined total number of absentee ballots sent by county to military and overseas voters: **0**
7. Total number of ballots in #6 returned by these voters. (Include any Federal Write-In Absentee Ballots, counted, because a UOCAVA did not return an official county ballot.): **0**
8. Total number of ballots in #7 counted: **0**

PROVISIONAL BALLOTS:

9. Total number of provisional ballots counted by county election board: **0**
10. Total number of provisional ballots not counted by county election board: **0**
11. The total number of provisional ballots cast by voters in the county in this election (System calculated as #9 + #10): **0**

ELECTION BUDGET AND EQUIPMENT:

12. BUDGETED cost for this election. Estimate if necessary: **32,168.76**
- 13(a). Provide the following information for the Election System Type:

| Election System Type | System Service Manufacturer | Voting System Model |
|-------------------------------------|-----------------------------|---------------------|
| Direct Recording Electronic Voting | MicroVote | EMS 4.3 |
| Optical Scan Ballot Tabulator | MicroVote | EMS 4.3 |
| ADA Compliant Ballot Marking Device | N/A | N/A |
| Election Management System | MicroVote | EMS 4.3 |
| Hand Counted Paper Ballot | YES | |

13(b). Name the System Service Manufacturer used by the County in this Election **MicroVote**

13(c). Describe any discrepancies with your voting system during the election if your County:

NONE

13(d). Name the Election Pollbook system service provider and the system model used by the county in this election:

| System Service Provider | System Model Number(s) |
|-------------------------|------------------------|
| KNOWiNK LLC | PollPad 2.5 |

13(e). Name the EPB System Service Manufacturer used by the County in this Election: **MicroVote**

CEB 9 Summary

ENCLOSURES:

14(a). Describe any malfunction or other problem with your voting system during the election. If your county did not experience any problems, please input "None" in the text box below. **NONE**

14(b). If you will be sending additional information on the malfunctions to IED, how will it be sent? **No Malfunction**

15. How will you be submitting Certified & Final Precinct Level Results for your county to IED? (Please use the Voter Status Counts by Precinct and Split report from SVRS): **Electronic Submission**

16. If you will be sending any additional information to the Election Division, how will it be sent? **Email**

17. Please enter the name, title and mailing address for your county election board members.

| Title | Name | Party Name | Address & Street | City, State, and Zip | E-mail Address | Phone Number |
|---------------------------------------|------------------|------------|--------------------------|-------------------------|----------------------------|--------------|
| Clerk/Secretary of the Election Board | DAVID W SHELTON | REPUBLICAN | 111 N 7TH ST SUITE 27 | VINCENNES IN 47591- | dshelton@knoxcounty.in.gov | 8128954927 |
| Election Board Chairman | ROBERT L SLAYTON | REPUBLICAN | 111 N 7TH STREET STE. 27 | VINCENNES IN 47591-2022 | rslayton@vinu.edu | 8128901292 |
| Election Board Member | DALE WEBSTER | DEMOCRAT | 111 N 7TH STREET STE. 27 | VINCENNES IN 47591-2022 | dale@websterwebsterlaw.com | 8128824305 |
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CEB 9 Summary

Kosciusko County

REGISTRATION AND TURNOUT:

1. Number of registered voters in **county** for this election (Note: If the election was held only in part of the county, the number of registered voters in that part of the county for this election): **53682**
2. Number of voters voting *in person at the polls on Election Day*: **9927**
3. Number of all voters voting *absentee including by mail, travel board, in-person, and military and overseas (UOCAVA)*: **1597**
4. Total number of voters who voted in this election (auto-calculated as #2 + #3): **11524**

ABSENTEE VOTING

5. Please enter the number of absentee ballots that were rejected (exclude UOCAVA): **1**
- 5(a). Please enter the number of absentee ballots Not Received (Not returned to your county by the deadline): **38**

UOCAVA (Voters using the Federal Postcard Application and Federal Write-In Absentee Ballots)

6. The combined total number of absentee ballots sent by county to military and overseas voters: **6**
7. Total number of ballots in #6 returned by these voters. (Include any Federal Write-In Absentee Ballots, counted, because a UOCAVA did not return an official county ballot.): **6**
8. Total number of ballots in #7 counted: **6**

PROVISIONAL BALLOTS:

9. Total number of provisional ballots counted by county election board: **9**
10. Total number of provisional ballots not counted by county election board: **13**
11. The total number of provisional ballots cast by voters in the county in this election (System calculated as #9 + #10): **22**

ELECTION BUDGET AND EQUIPMENT:

12. BUDGETED cost for this election. Estimate if necessary: **121,595**
- 13(a). Provide the following information for the Election System Type:

| Election System Type | System Service Manufacturer | Voting System Model |
|-------------------------------------|-----------------------------|---------------------|
| Direct Recording Electronic Voting | MicroVote | EMS 4.4 |
| Optical Scan Ballot Tabulator | MicroVote | EMS 4.4 |
| ADA Compliant Ballot Marking Device | MicroVote | EMS 4.4 |
| Election Management System | MicroVote | EMS 4.4 |
| Hand Counted Paper Ballot | NO | |

- 13(b). Name the System Service Manufacturer used by the County in this Election **MicroVote**

- 13(c). Describe any discrepancies with your voting system during the election if your County:
None

- 13(d). Name the Election Pollbook system service provider and the system model used by the county in this election:

| System Service Provider | System Model Number(s) |
|-------------------------|------------------------|
| KNOWiNK LLC | PollPad 3.0.1 |

- 13(e). Name the EPB System Service Manufacturer used by the County in this Election: **KNOWiNK LLC**

CEB 9 Summary

ENCLOSURES:

14(a). Describe any malfunction or other problem with your voting system during the election. If your county did not experience any problems, please input "None" in the text box below. **None**

14(b). If you will be sending additional information on the malfunctions to IED, how will it be sent? **No Malfunction**

15. How will you be submitting Certified & Final Precinct Level Results for your county to IED? (Please use the Voter Status Counts by Precinct and Split report from SVRS): **Electronic Submission**

16. If you will be sending any additional information to the Election Division, how will it be sent? **Email**

17. Please enter the name, title and mailing address for your county election board members.

| Title | Name | Party Name | Address & Street | City, State, and Zip | E-mail Address | Phone Number |
|---------------------------------------|---------------|------------|------------------|----------------------|--------------------|--------------|
| Election Board Chairman | BILL C MORTON | Democratic | 121 N LAKE ST | WARSAW IN 46580 | wcmorton@gmail.com | 7086554314 |
| Election Board Member | RANDALL GIROD | Republican | 121 N LAKE ST | WARSAW IN 46580 | randthai@aol.com | 2605578421 |
| Clerk/Secretary of the Election Board | ANN TORPY | Republican | 121 N LAKE ST | WARSAW IN 46580 | atorpy@kcgov.com | 5742652638 |
| | | | | | | |
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CEB 9 Summary

LaGrange County

REGISTRATION AND TURNOUT:

1. Number of registered voters in **county** for this election (Note: If the election was held only in part of the county, the number of registered voters in that part of the county for this election): **16582**
2. Number of voters voting *in person at the polls on Election Day*: **2240**
3. Number of all voters voting *absentee including by mail, travel board, in-person, and military and overseas (UOCAVA)*: **264**
4. Total number of voters who voted in this election (auto-calculated as #2 + #3): **2504**

ABSENTEE VOTING

5. Please enter the number of absentee ballots that were rejected (exclude UOCAVA): **1**
- 5(a). Please enter the number of absentee ballots Not Received (Not returned to your county by the deadline): **2**

UOCAVA (Voters using the Federal Postcard Application and Federal Write-In Absentee Ballots)

6. The combined total number of absentee ballots sent by county to military and overseas voters: **0**
7. Total number of ballots in #6 returned by these voters. (Include any Federal Write-In Absentee Ballots, counted, because a UOCAVA did not return an official county ballot.): **0**
8. Total number of ballots in #7 counted: **0**

PROVISIONAL BALLOTS:

9. Total number of provisional ballots counted by county election board: **1**
10. Total number of provisional ballots not counted by county election board: **0**
11. The total number of provisional ballots cast by voters in the county in this election (System calculated as #9 + #10): **1**

ELECTION BUDGET AND EQUIPMENT:

12. BUDGETED cost for this election. Estimate if necessary: **25,765.00**
- 13(a). Provide the following information for the Election System Type:

| Election System Type | System Service Manufacturer | Voting System Model |
|-------------------------------------|-----------------------------|---------------------|
| Direct Recording Electronic Voting | MicroVote | EMS 4.4 |
| Optical Scan Ballot Tabulator | MicroVote | EMS 4.4 |
| ADA Compliant Ballot Marking Device | N/A | N/A |
| Election Management System | MicroVote | EMS 4.4 |
| Hand Counted Paper Ballot | NO | |

13(b). Name the System Service Manufacturer used by the County in this Election **MicroVote**

13(c). Describe any discrepancies with your voting system during the election if your County:

None

13(d). Name the Election Pollbook system service provider and the system model used by the county in this election:

| System Service Provider | System Model Number(s) |
|-------------------------|------------------------|
| KNOWiNK LLC | PollPad 3.0.1 |

13(e). Name the EPB System Service Manufacturer used by the County in this Election: **MicroVote**

CEB 9 Summary

ENCLOSURES:

14(a). Describe any malfunction or other problem with your voting system during the election. If your county did not experience any problems, please input "None" in the text box below. **None**

14(b). If you will be sending additional information on the malfunctions to IED, how will it be sent? **No Malfunction**

15. How will you be submitting Certified & Final Precinct Level Results for your county to IED? (Please use the Voter Status Counts by Precinct and Split report from SVRS): **Electronic Submission**

16. If you will be sending any additional information to the Election Division, how will it be sent? **Email**

17. Please enter the name, title and mailing address for your county election board members.

| Title | Name | Party Name | Address & Street | City, State, and Zip | E-mail Address | Phone Number |
|---------------------------------------|---------------------|------------|--------------------------|----------------------|-----------------------------|--------------|
| Clerk/Secretary of the Election Board | KIMBERLEY L JOHNSON | Republican | 105 N DETROIT ST | LAGRANGE IN 46761 | kjohnson@lagrangecounty.org | 260-499-6368 |
| Election Board Chairman | PEGGY IDDINGS | Republican | 105 NORTH DETROIT STREET | LAGRANGE IN 46761 | none | 260-499-6368 |
| Election Board Member | JENNIFER MILLER | Democrat | 105 NORTH DETROIT STREET | LAGRANGE IN 46761 | none | 260-499-6368 |
| | | | | | | |
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CEB 9 Summary

Lake County

REGISTRATION AND TURNOUT:

1. Number of registered voters in **county** for this election (Note: If the election was held only in part of the county, the number of registered voters in that part of the county for this election): **364925**
2. Number of voters voting *in person at the polls on Election Day*: **33136**
3. Number of all voters voting *absentee including by mail, travel board, in-person, and military and overseas (UOCAVA)*: **13157**
4. Total number of voters who voted in this election (auto-calculated as #2 + #3): **46293**

ABSENTEE VOTING

5. Please enter the number of absentee ballots that were rejected (exclude UOCAVA): **59**
- 5(a). Please enter the number of absentee ballots Not Received (Not returned to your county by the deadline): **317**

UOCAVA (Voters using the Federal Postcard Application and Federal Write-In Absentee Ballots)

6. The combined total number of absentee ballots sent by county to military and overseas voters: **30**
7. Total number of ballots in #6 returned by these voters. (Include any Federal Write-In Absentee Ballots, counted, because a UOCAVA did not return an official county ballot.): **22**
8. Total number of ballots in #7 counted: **22**

PROVISIONAL BALLOTS:

9. Total number of provisional ballots counted by county election board: **26**
10. Total number of provisional ballots not counted by county election board: **74**
11. The total number of provisional ballots cast by voters in the county in this election (System calculated as #9 + #10): **100**

ELECTION BUDGET AND EQUIPMENT:

12. BUDGETED cost for this election. Estimate if necessary: **400,000.00**
- 13(a). Provide the following information for the Election System Type:

| Election System Type | System Service Manufacturer | Voting System Model |
|-------------------------------------|-----------------------------|---------------------|
| Direct Recording Electronic Voting | MicroVote | EMS 4.4 |
| Optical Scan Ballot Tabulator | MicroVote | EMS 4.4 |
| ADA Compliant Ballot Marking Device | MicroVote | EMS 4.4 |
| Election Management System | MicroVote | EMS 4.4 |
| Hand Counted Paper Ballot | NO | |

- 13(b). Name the System Service Manufacturer used by the County in this Election **MicroVote**

- 13(c). Describe any discrepancies with your voting system during the election if your County:
none

- 13(d). Name the Election Pollbook system service provider and the system model used by the county in this election:

| System Service Provider | System Model Number(s) |
|-------------------------|------------------------|
| KNOWiNK LLC | PollPad 3.0.1 |

- 13(e). Name the EPB System Service Manufacturer used by the County in this Election: **KNOWiNK LLC**

CEB 9 Summary

ENCLOSURES:

14(a). Describe any malfunction or other problem with your voting system during the election. If your county did not experience any problems, please input "None" in the text box below. **none**

14(b). If you will be sending additional information on the malfunctions to IED, how will it be sent? **No Malfunction**

15. How will you be submitting Certified & Final Precinct Level Results for your county to IED? (Please use the Voter Status Counts by Precinct and Split report from SVRS): **Electronic Submission**

16. If you will be sending any additional information to the Election Division, how will it be sent? **Email**

17. Please enter the name, title and mailing address for your county election board members.

| Title | Name | Party Name | Address & Street | City, State, and Zip | E-mail Address | Phone Number |
|---------------------------------------|-------------------|------------|--------------------|----------------------|--------------------------|--------------|
| Election Board Chairman | KEVIN SMITH | Democratic | 2293 N MAIN STREET | CROWN POINT IN 46307 | ksmith@smithsersic.Com | 2199337600 |
| Clerk/Secretary of the Election Board | LORENZO ARREDONDO | Democratic | 2293 N MAIN STREET | CROWN POINT IN 46307 | arredlx@lakecountyin.org | 2197553000 |
| Election Board Member | MICHAEL MELLON | Republican | 2293 N MAIN STREET | CROWN POINT IN 46307 | MIKE@AMBFINANCIAL.COM | 2197553795 |
| Election Board Member | BOB TRIBBLE | Democratic | 2293 N MAIN STREET | CROWN POINT IN 46307 | bdtrib@aol.com | 219-755-3795 |
| Election Board Member | JOHN REED | Republican | 2293 N MAIN STREET | CROWN POINT IN 46307 | JPRATLAW@AOL.COM | 2197124104 |

CEB 9 Summary

LaPorte County

REGISTRATION AND TURNOUT:

1. Number of registered voters in **county** for this election (Note: If the election was held only in part of the county, the number of registered voters in that part of the county for this election): **78377**
2. Number of voters voting *in person at the polls on Election Day*: **10320**
3. Number of all voters voting *absentee including by mail, travel board, in-person, and military and overseas (UOCAVA)*: **2473**
4. Total number of voters who voted in this election (auto-calculated as #2 + #3): **12793**

ABSENTEE VOTING

5. Please enter the number of absentee ballots that were rejected (exclude UOCAVA): **0**
- 5(a). Please enter the number of absentee ballots Not Received (Not returned to your county by the deadline): **82**

UOCAVA (Voters using the Federal Postcard Application and Federal Write-In Absentee Ballots)

6. The combined total number of absentee ballots sent by county to military and overseas voters: **7**
7. Total number of ballots in #6 returned by these voters. (Include any Federal Write-In Absentee Ballots, counted, because a UOCAVA did not return an official county ballot.): **4**
8. Total number of ballots in #7 counted: **4**

PROVISIONAL BALLOTS:

9. Total number of provisional ballots counted by county election board: **0**
10. Total number of provisional ballots not counted by county election board: **4**
11. The total number of provisional ballots cast by voters in the county in this election (System calculated as #9 + #10): **4**

ELECTION BUDGET AND EQUIPMENT:

12. BUDGETED cost for this election. Estimate if necessary: **65,000.00**
- 13(a). Provide the following information for the Election System Type:

| Election System Type | System Service Manufacturer | Voting System Model |
|-------------------------------------|-----------------------------|---------------------|
| Direct Recording Electronic Voting | MicroVote | EMS 4.3 |
| Optical Scan Ballot Tabulator | N/A | N/A |
| ADA Compliant Ballot Marking Device | N/A | N/A |
| Election Management System | MicroVote | EMS 4.3 |
| Hand Counted Paper Ballot | NO | |

13(b). Name the System Service Manufacturer used by the County in this Election **MicroVote**

13(c). Describe any discrepancies with your voting system during the election if your County:

None

13(d). Name the Election Pollbook system service provider and the system model used by the county in this election:

| System Service Provider | System Model Number(s) |
|-------------------------|------------------------|
| KNOWiNK LLC | PollPad 3.0.1 |

13(e). Name the EPB System Service Manufacturer used by the County in this Election: **MicroVote**

CEB 9 Summary

ENCLOSURES:

14(a). Describe any malfunction or other problem with your voting system during the election. If your county did not experience any problems, please input "None" in the text box below. **None**

14(b). If you will be sending additional information on the malfunctions to IED, how will it be sent? **No Malfunction**

15. How will you be submitting Certified & Final Precinct Level Results for your county to IED? (Please use the Voter Status Counts by Precinct and Split report from SVRS): **Electronic Submission**

16. If you will be sending any additional information to the Election Division, how will it be sent? **Email**

17. Please enter the name, title and mailing address for your county election board members.

| Title | Name | Party Name | Address & Street | City, State, and Zip | E-mail Address | Phone Number |
|---------------------------------------|-------------------|------------|--------------------|----------------------|------------------------------------|--------------|
| Clerk/Secretary of the Election Board | HEATHER STEVENS | Republican | 813 LINCOLNWAY WAY | LAPORTE IN 46350 | hstevens@laporteco.in.gov | 2193266808 |
| Election Board Chairman | CHARLES WATTERSON | Republican | 813 LINCOLNWAY WAY | LAPORTE IN 46350 | cwatterson@joerobertsllaw.com | 2196084019 |
| Election Board Member | NELSON PICHARDO | Democrat | 813 LINCOLNWAY WAY | LAPORTE IN 46350 | npichardo@friedmanassociatespc.com | 2193261264 |
| | | | | | | |
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CEB 9 Summary

Lawrence County

REGISTRATION AND TURNOUT:

1. Number of registered voters in **county** for this election (Note: If the election was held only in part of the county, the number of registered voters in that part of the county for this election): **33125**
2. Number of voters voting *in person at the polls on Election Day*: **3629**
3. Number of all voters voting *absentee including by mail, travel board, in-person, and military and overseas (UOCAVA)*: **2195**
4. Total number of voters who voted in this election (auto-calculated as #2 + #3): **5824**

ABSENTEE VOTING

5. Please enter the number of absentee ballots that were rejected (exclude UOCAVA): **7**
- 5(a). Please enter the number of absentee ballots Not Received (Not returned to your county by the deadline): **27**

UOCAVA (Voters using the Federal Postcard Application and Federal Write-In Absentee Ballots)

6. The combined total number of absentee ballots sent by county to military and overseas voters: **6**
7. Total number of ballots in #6 returned by these voters. (Include any Federal Write-In Absentee Ballots, counted, because a UOCAVA did not return an official county ballot.): **6**
8. Total number of ballots in #7 counted: **3**

PROVISIONAL BALLOTS:

9. Total number of provisional ballots counted by county election board: **1**
10. Total number of provisional ballots not counted by county election board: **4**
11. The total number of provisional ballots cast by voters in the county in this election (System calculated as #9 + #10): **5**

ELECTION BUDGET AND EQUIPMENT:

12. BUDGETED cost for this election. Estimate if necessary: **47,754.65**
- 13(a). Provide the following information for the Election System Type:

| Election System Type | System Service Manufacturer | Voting System Model |
|-------------------------------------|-----------------------------|---------------------|
| Direct Recording Electronic Voting | MicroVote | EMS 4.4 |
| Optical Scan Ballot Tabulator | MicroVote | EMS 4.4 |
| ADA Compliant Ballot Marking Device | MicroVote | EMS 4.4 |
| Election Management System | MicroVote | EMS 4.4 |
| Hand Counted Paper Ballot | YES | |

13(b). Name the System Service Manufacturer used by the County in this Election **MicroVote**

13(c). Describe any discrepancies with your voting system during the election if your County:

CARD READER NEEDED CLEANED, CLEANED IT THEN IT WORKED FINE

13(d). Name the Election Pollbook system service provider and the system model used by the county in this election:

| System Service Provider | System Model Number(s) |
|-------------------------|------------------------|
| KNOWiNK LLC | PollPad 3.0.1 |

13(e). Name the EPB System Service Manufacturer used by the County in this Election: **KNOWiNK LLC**

CEB 9 Summary

ENCLOSURES:

14(a). Describe any malfunction or other problem with your voting system during the election. If your county did not experience any problems, please input "None" in the text box below. **CARD READER NEEDED CLEANED, CLEANED IT THEN IT WORKED FINE**

14(b). If you will be sending additional information on the malfunctions to IED, how will it be sent? **No Malfunction**

15. How will you be submitting Certified & Final Precinct Level Results for your county to IED? (Please use the Voter Status Counts by Precinct and Split report from SVRS): **Electronic Submission**

16. If you will be sending any additional information to the Election Division, how will it be sent? **Email**

17. Please enter the name, title and mailing address for your county election board members.

| Title | Name | Party Name | Address & Street | City, State, and Zip | E-mail Address | Phone Number |
|---------------------------------------|------------------|------------|------------------|----------------------|--------------------------------|--------------|
| Clerk/Secretary of the Election Board | BILLIE TUMEY | Republican | 918 16TH STREET | BEDFORD IN 47421 | BTUMEY@LAWRENCECOUNTY.IN.GOV | 8122772036 |
| Election Board Chairman | JOHN WILLIAMS | Republican | 918 16TH STREET | BEDFORD IN 47421 | SCARLILE@LAWRENCECOUNTY.IN.GOV | 8122772036 |
| Election Board Member | DONALD ROBERTSON | Democratic | 918 16TH STREET | BEDFORD IN 47421 | SCARLILE@LAWRENCECOUNTY.IN.GOV | 8122772036 |
| | | | | | | |
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CEB 9 Summary

Madison County

REGISTRATION AND TURNOUT:

1. Number of registered voters in **county** for this election (Note: If the election was held only in part of the county, the number of registered voters in that part of the county for this election): **89711**
2. Number of voters voting *in person at the polls on Election Day*: **9599**
3. Number of all voters voting *absentee including by mail, travel board, in-person, and military and overseas (UOCAVA)*: **5674**
4. Total number of voters who voted in this election (auto-calculated as #2 + #3): **15273**

ABSENTEE VOTING

5. Please enter the number of absentee ballots that were rejected (exclude UOCAVA): **0**
- 5(a). Please enter the number of absentee ballots Not Received (Not returned to your county by the deadline): **267**

UOCAVA (Voters using the Federal Postcard Application and Federal Write-In Absentee Ballots)

6. The combined total number of absentee ballots sent by county to military and overseas voters: **5**
7. Total number of ballots in #6 returned by these voters. (Include any Federal Write-In Absentee Ballots, counted, because a UOCAVA did not return an official county ballot.): **2**
8. Total number of ballots in #7 counted: **2**

PROVISIONAL BALLOTS:

9. Total number of provisional ballots counted by county election board: **16**
10. Total number of provisional ballots not counted by county election board: **13**
11. The total number of provisional ballots cast by voters in the county in this election (System calculated as #9 + #10): **29**

ELECTION BUDGET AND EQUIPMENT:

12. BUDGETED cost for this election. Estimate if necessary: **398,570.00**
- 13(a). Provide the following information for the Election System Type:

| Election System Type | System Service Manufacturer | Voting System Model |
|-------------------------------------|-----------------------------|---------------------|
| Direct Recording Electronic Voting | N/A | N/A |
| Optical Scan Ballot Tabulator | ES&S | EVS 5.2.4.0 |
| ADA Compliant Ballot Marking Device | ES&S | EVS 5.2.4.0 |
| Election Management System | ES&S | EVS 5.2.4.0 |
| Hand Counted Paper Ballot | NO | |

- 13(b). Name the System Service Manufacturer used by the County in this Election **ES&S**

- 13(c). Describe any discrepancies with your voting system during the election if your County:

NONE

- 13(d). Name the Election Pollbook system service provider and the system model used by the county in this election:

| System Service Provider | System Model Number(s) |
|-------------------------|------------------------|
| KNOWiNK LLC | PollPad 3.0.1 |

- 13(e). Name the EPB System Service Manufacturer used by the County in this Election: **KNOWiNK LLC**

CEB 9 Summary

ENCLOSURES:

14(a). Describe any malfunction or other problem with your voting system during the election. If your county did not experience any problems, please input "None" in the text box below. **NONE**

14(b). If you will be sending additional information on the malfunctions to IED, how will it be sent? **No Malfunction**

15. How will you be submitting Certified & Final Precinct Level Results for your county to IED? (Please use the Voter Status Counts by Precinct and Split report from SVRS): **Electronic Submission**

16. If you will be sending any additional information to the Election Division, how will it be sent? **Email**

17. Please enter the name, title and mailing address for your county election board members.

| Title | Name | Party Name | Address & Street | City, State, and Zip | E-mail Address | Phone Number |
|---------------------------------------|--------------|------------|------------------|----------------------|-----------------------------|--------------|
| Clerk/Secretary of the Election Board | OLIVIA PRATT | REPUBLICAN | 16 E 9TH ST | ANDERSON IN 46013 | opratt@madisoncounty.in.gov | 7656419457 |
| Election Board Chairman | RUSS WILLIS | REPUBLICAN | 16 E 9TH ST | ANDERSON IN 46013 | RUSSDENA73@AOL.COM | 7656234847 |
| Election Board Member | LUDY WATKINS | DEMOCRAT | 16 E 9TH ST | ANDERSON IN 46013 | ludywatkins@gmail.com | 7656238261 |
| | | | | | | |
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CEB 9 Summary

Marion County

REGISTRATION AND TURNOUT:

1. Number of registered voters in **county** for this election (Note: If the election was held only in part of the county, the number of registered voters in that part of the county for this election): **678067**
2. Number of voters voting *in person at the polls on Election Day*: **56261**
3. Number of all voters voting *absentee including by mail, travel board, in-person, and military and overseas (UOCAVA)*: **16825**
4. Total number of voters who voted in this election (auto-calculated as #2 + #3): **73086**

ABSENTEE VOTING

5. Please enter the number of absentee ballots that were rejected (exclude UOCAVA): **122**
- 5(a). Please enter the number of absentee ballots Not Received (Not returned to your county by the deadline): **929**

UOCAVA (Voters using the Federal Postcard Application and Federal Write-In Absentee Ballots)

6. The combined total number of absentee ballots sent by county to military and overseas voters: **152**
7. Total number of ballots in #6 returned by these voters. (Include any Federal Write-In Absentee Ballots, counted, because a UOCAVA did not return an official county ballot.): **121**
8. Total number of ballots in #7 counted: **121**

PROVISIONAL BALLOTS:

9. Total number of provisional ballots counted by county election board: **109**
10. Total number of provisional ballots not counted by county election board: **118**
11. The total number of provisional ballots cast by voters in the county in this election (System calculated as #9 + #10): **227**

ELECTION BUDGET AND EQUIPMENT:

12. BUDGETED cost for this election. Estimate if necessary: **3,000,000**
- 13(a). Provide the following information for the Election System Type:

| Election System Type | System Service Manufacturer | Voting System Model |
|-------------------------------------|-----------------------------|---------------------|
| Direct Recording Electronic Voting | N/A | N/A |
| Optical Scan Ballot Tabulator | ES&S | EVS 5.2.4.0 |
| ADA Compliant Ballot Marking Device | ES&S | EVS 5.2.4.0 |
| Election Management System | ES&S | EVS 5.2.4.0 |
| Hand Counted Paper Ballot | NO | |

- 13(b). Name the System Service Manufacturer used by the County in this Election **ES&S**

- 13(c). Describe any discrepancies with your voting system during the election if your County:

None

- 13(d). Name the Election Pollbook system service provider and the system model used by the county in this election:

| System Service Provider | System Model Number(s) |
|-------------------------|------------------------|
| KNOWiNK LLC | PollPad 3.0 |

- 13(e). Name the EPB System Service Manufacturer used by the County in this Election: **KNOWiNK LLC**

CEB 9 Summary

ENCLOSURES:

14(a). Describe any malfunction or other problem with your voting system during the election. If your county did not experience any problems, please input "None" in the text box below.

ABS voters with "Cure Needed" statuses caused issues for our epollbook vendor. We also had checkins from training and L&A testing that were uploaded incorrectly to SVRS.

14(b). If you will be sending additional information on the malfunctions to IED, how will it be sent? **Email**

15. How will you be submitting Certified & Final Precinct Level Results for your county to IED? (Please use the Voter Status Counts by Precinct and Split report from SVRS): **Email**

16. If you will be sending any additional information to the Election Division, how will it be sent? **Email**

17. Please enter the name, title and mailing address for your county election board members.

| Title | Name | Party Name | Address & Street | City, State, and Zip | E-mail Address | Phone Number |
|---------------------------------------|------------------|------------|---------------------------------|-----------------------|-------------------------|--------------|
| Clerk/Secretary of the Election Board | MYLA A ELDRIDGE | Democratic | 200 E. WASHINGTON STREET, W-144 | INDIANAPOLIS IN 46204 | MYLA.ELDRIDGE@INDY.GOV | 3173272051 |
| Election Board Member | JENNIFER L. PING | Republican | 200 E. WASHINGTON STREET, W-144 | INDIANAPOLIS IN 46204 | jping@kdlegal.com | 3173272051 |
| Election Board Chairman | NOLITA STEWART | Democratic | 200 E. WASHINGTON STREET, W-144 | INDIANAPOLIS IN 46204 | nolitastewart@gmail.com | 3173272051 |
| | | | | | | |
| | | | | | | |

CEB 9 Summary

Marshall County

REGISTRATION AND TURNOUT:

1. Number of registered voters in **county** for this election (Note: If the election was held only in part of the county, the number of registered voters in that part of the county for this election): **29466**
2. Number of voters voting *in person at the polls on Election Day*: **3028**
3. Number of all voters voting *absentee including by mail, travel board, in-person, and military and overseas (UOCAVA)*: **1025**
4. Total number of voters who voted in this election (auto-calculated as #2 + #3): **4053**

ABSENTEE VOTING

5. Please enter the number of absentee ballots that were rejected (exclude UOCAVA): **0**
- 5(a). Please enter the number of absentee ballots Not Received (Not returned to your county by the deadline): **15**

UOCAVA (Voters using the Federal Postcard Application and Federal Write-In Absentee Ballots)

6. The combined total number of absentee ballots sent by county to military and overseas voters: **2**
7. Total number of ballots in #6 returned by these voters. (Include any Federal Write-In Absentee Ballots, counted, because a UOCAVA did not return an official county ballot.): **2**
8. Total number of ballots in #7 counted: **2**

PROVISIONAL BALLOTS:

9. Total number of provisional ballots counted by county election board: **0**
10. Total number of provisional ballots not counted by county election board: **1**
11. The total number of provisional ballots cast by voters in the county in this election (System calculated as #9 + #10): **1**

ELECTION BUDGET AND EQUIPMENT:

12. BUDGETED cost for this election. Estimate if necessary: **39,480.59**
- 13(a). Provide the following information for the Election System Type:

| Election System Type | System Service Manufacturer | Voting System Model |
|-------------------------------------|-----------------------------|---------------------|
| Direct Recording Electronic Voting | MicroVote | EMS 4.4 |
| Optical Scan Ballot Tabulator | MicroVote | EMS 4.4 |
| ADA Compliant Ballot Marking Device | MicroVote | EMS 4.4 |
| Election Management System | MicroVote | EMS 4.4 |
| Hand Counted Paper Ballot | NO | |

13(b). Name the System Service Manufacturer used by the County in this Election **MicroVote**

13(c). Describe any discrepancies with your voting system during the election if your County:
none

13(d). Name the Election Pollbook system service provider and the system model used by the county in this election:

| System Service Provider | System Model Number(s) |
|-------------------------|------------------------|
| KNOWiNK LLC | PollPad 2.3.7 |

13(e). Name the EPB System Service Manufacturer used by the County in this Election: **KNOWiNK LLC**

CEB 9 Summary

ENCLOSURES:

14(a). Describe any malfunction or other problem with your voting system during the election. If your county did not experience any problems, please input "None" in the text box below. **none**

14(b). If you will be sending additional information on the malfunctions to IED, how will it be sent? **No Malfunction**

15. How will you be submitting Certified & Final Precinct Level Results for your county to IED? (Please use the Voter Status Counts by Precinct and Split report from SVRS): **Email**

16. If you will be sending any additional information to the Election Division, how will it be sent? **Email**

17. Please enter the name, title and mailing address for your county election board members.

| Title | Name | Party Name | Address & Street | City, State, and Zip | E-mail Address | Phone Number |
|---------------------------------------|-------------------|------------|----------------------|----------------------|------------------------|--------------|
| Clerk/Secretary of the Election Board | DEBORAH VANDEMARK | Republican | 211 W MADISON STREET | PLYMOUTH IN 46563 | debv@co.marshall.in.us | 5749368922 |
| Election Board Chairman | SEAN SURRISI | Republican | 211 W MADISON STREET | PLYMOUTH IN 46563 | seansurrisi@gmail.com | 5749368922 |
| Election Board Member | RALPH R HUFF | Democrat | 211 W MADISON STREET | PLYMOUTH IN 46563 | rrhuff@comcast.net | 5749368922 |
| | | | | | | |
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CEB 9 Summary

Martin County

REGISTRATION AND TURNOUT:

1. Number of registered voters in **county** for this election (Note: If the election was held only in part of the county, the number of registered voters in that part of the county for this election): **7662**
2. Number of voters voting *in person at the polls on Election Day*: **1165**
3. Number of all voters voting *absentee including by mail, travel board, in-person, and military and overseas (UOCAVA)*: **355**
4. Total number of voters who voted in this election (auto-calculated as #2 + #3): **1520**

ABSENTEE VOTING

5. Please enter the number of absentee ballots that were rejected (exclude UOCAVA): **0**
- 5(a). Please enter the number of absentee ballots Not Received (Not returned to your county by the deadline): **10**

UOCAVA (Voters using the Federal Postcard Application and Federal Write-In Absentee Ballots)

6. The combined total number of absentee ballots sent by county to military and overseas voters: **0**
7. Total number of ballots in #6 returned by these voters. (Include any Federal Write-In Absentee Ballots, counted, because a UOCAVA did not return an official county ballot.): **0**
8. Total number of ballots in #7 counted: **0**

PROVISIONAL BALLOTS:

9. Total number of provisional ballots counted by county election board: **1**
10. Total number of provisional ballots not counted by county election board: **8**
11. The total number of provisional ballots cast by voters in the county in this election (System calculated as #9 + #10): **9**

ELECTION BUDGET AND EQUIPMENT:

12. BUDGETED cost for this election. Estimate if necessary: **29,000**
- 13(a). Provide the following information for the Election System Type:

| Election System Type | System Service Manufacturer | Voting System Model |
|-------------------------------------|-----------------------------|---------------------|
| Direct Recording Electronic Voting | ES&S | EVS 5.2.2.0 |
| Optical Scan Ballot Tabulator | ES&S | EVS 5.2.2.0 |
| ADA Compliant Ballot Marking Device | ES&S | EVS 5.2.2.0 |
| Election Management System | ES&S | EVS 5.2.2.0 |
| Hand Counted Paper Ballot | NO | |

- 13(b). Name the System Service Manufacturer used by the County in this Election **ES&S**

- 13(c). Describe any discrepancies with your voting system during the election if your County:
none

- 13(d). Name the Election Pollbook system service provider and the system model used by the county in this election:

| System Service Provider | System Model Number(s) |
|-------------------------|------------------------|
| KNOWiNK LLC | PollPad 2.5 |

- 13(e). Name the EPB System Service Manufacturer used by the County in this Election: **MicroVote**

CEB 9 Summary

ENCLOSURES:

14(a). Describe any malfunction or other problem with your voting system during the election. If your county did not experience any problems, please input "None" in the text box below. **none**

14(b). If you will be sending additional information on the malfunctions to IED, how will it be sent? **No Malfunction**

15. How will you be submitting Certified & Final Precinct Level Results for your county to IED? (Please use the Voter Status Counts by Precinct and Split report from SVRS): **Electronic Submission**

16. If you will be sending any additional information to the Election Division, how will it be sent? **Fax**

17. Please enter the name, title and mailing address for your county election board members.

| Title | Name | Party Name | Address & Street | City, State, and Zip | E-mail Address | Phone Number |
|---------------------------------------|-------------------|------------|------------------|----------------------|---------------------------|--------------|
| Clerk/Secretary of the Election Board | GERALD MONTGOMERY | Republican | PO BOX 120 | SHOALS IN 47581 | clerk@martincounty.in.gov | 812-247-3651 |
| Election Board Chairman | LARRY FELLERS | Democratic | PO BOX 120 | SHOALS IN 47581 | none | 812-295-8437 |
| Election Board Member | SUE SIMS | Republican | PO BOX 120 | SHOALS IN 47581 | none | 812-6317738 |
| | | | | | | |
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CEB 9 Summary

Miami County

REGISTRATION AND TURNOUT:

1. Number of registered voters in **county** for this election (Note: If the election was held only in part of the county, the number of registered voters in that part of the county for this election): **21851**
2. Number of voters voting *in person at the polls on Election Day*: **1717**
3. Number of all voters voting *absentee including by mail, travel board, in-person, and military and overseas (UOCAVA)*: **1161**
4. Total number of voters who voted in this election (auto-calculated as #2 + #3): **2878**

ABSENTEE VOTING

5. Please enter the number of absentee ballots that were rejected (exclude UOCAVA): **0**
- 5(a). Please enter the number of absentee ballots Not Received (Not returned to your county by the deadline): **26**

UOCAVA (Voters using the Federal Postcard Application and Federal Write-In Absentee Ballots)

6. The combined total number of absentee ballots sent by county to military and overseas voters: **6**
7. Total number of ballots in #6 returned by these voters. (Include any Federal Write-In Absentee Ballots, counted, because a UOCAVA did not return an official county ballot.): **4**
8. Total number of ballots in #7 counted: **4**

PROVISIONAL BALLOTS:

9. Total number of provisional ballots counted by county election board: **0**
10. Total number of provisional ballots not counted by county election board: **0**
11. The total number of provisional ballots cast by voters in the county in this election (System calculated as #9 + #10): **0**

ELECTION BUDGET AND EQUIPMENT:

12. BUDGETED cost for this election. Estimate if necessary: **32,000.00**
- 13(a). Provide the following information for the Election System Type:

| Election System Type | System Service Manufacturer | Voting System Model |
|-------------------------------------|-----------------------------|---------------------|
| Direct Recording Electronic Voting | MicroVote | EMS 4.1 |
| Optical Scan Ballot Tabulator | N/A | N/A |
| ADA Compliant Ballot Marking Device | N/A | N/A |
| Election Management System | MicroVote | EMS 4.1 |
| Hand Counted Paper Ballot | NO | |

- 13(b). Name the System Service Manufacturer used by the County in this Election **MicroVote**

- 13(c). Describe any discrepancies with your voting system during the election if your County:

None

- 13(d). Name the Election Pollbook system service provider and the system model used by the county in this election:

| System Service Provider | System Model Number(s) |
|-------------------------|------------------------|
| KNOWiNK LLC | PollPad 2.5 |

- 13(e). Name the EPB System Service Manufacturer used by the County in this Election: **KNOWiNK LLC**

CEB 9 Summary

ENCLOSURES:

14(a). Describe any malfunction or other problem with your voting system during the election. If your county did not experience any problems, please input "None" in the text box below. **None**

14(b). If you will be sending additional information on the malfunctions to IED, how will it be sent? **No Malfunction**

15. How will you be submitting Certified & Final Precinct Level Results for your county to IED? (Please use the Voter Status Counts by Precinct and Split report from SVRS): **Electronic Submission**

16. If you will be sending any additional information to the Election Division, how will it be sent? **Email**

17. Please enter the name, title and mailing address for your county election board members.

| Title | Name | Party Name | Address & Street | City, State, and Zip | E-mail Address | Phone Number |
|---------------------------------------|-----------------|------------|----------------------------|----------------------|--------------------------|--------------|
| Clerk/Secretary of the Election Board | SHERRY RABER | Republican | 25 NORTH BROADWAY ROOM 108 | PERU IN 46970 | sraber@miamicountyin.gov | 765-472-3901 |
| Election Board Chairman | S. DIANA SMILEY | Republican | 25 N. BROADWAY, ROOM 108 | PERU IN 46970 | sdsmiley@gmail.com | 765-472-3901 |
| Election Board Member | JUANITA WITHROW | Democrat | 25 N. BROADWAY, ROOM 108 | PERU IN 46970 | jwithrow67@comcast.net | 765-472-3901 |
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CEB 9 Summary

Monroe County

REGISTRATION AND TURNOUT:

1. Number of registered voters in **county** for this election (Note: If the election was held only in part of the county, the number of registered voters in that part of the county for this election): **97127**
2. Number of voters voting *in person at the polls on Election Day*: **9099**
3. Number of all voters voting *absentee including by mail, travel board, in-person, and military and overseas (UOCAVA)*: **4661**
4. Total number of voters who voted in this election (auto-calculated as #2 + #3): **13760**

ABSENTEE VOTING

5. Please enter the number of absentee ballots that were rejected (exclude UOCAVA): **20**
- 5(a). Please enter the number of absentee ballots Not Received (Not returned to your county by the deadline): **190**

UOCAVA (Voters using the Federal Postcard Application and Federal Write-In Absentee Ballots)

6. The combined total number of absentee ballots sent by county to military and overseas voters: **39**
7. Total number of ballots in #6 returned by these voters. (Include any Federal Write-In Absentee Ballots, counted, because a UOCAVA did not return an official county ballot.): **28**
8. Total number of ballots in #7 counted: **28**

PROVISIONAL BALLOTS:

9. Total number of provisional ballots counted by county election board: **18**
10. Total number of provisional ballots not counted by county election board: **14**
11. The total number of provisional ballots cast by voters in the county in this election (System calculated as #9 + #10): **32**

ELECTION BUDGET AND EQUIPMENT:

12. BUDGETED cost for this election. Estimate if necessary: **295,066**
- 13(a). Provide the following information for the Election System Type:

| Election System Type | System Service Manufacturer | Voting System Model |
|-------------------------------------|-----------------------------|---------------------|
| Direct Recording Electronic Voting | Hart InterCivic | Verity 2.5 |
| Optical Scan Ballot Tabulator | Hart InterCivic | Verity 2.5 |
| ADA Compliant Ballot Marking Device | Hart InterCivic | Verity 2.5 |
| Election Management System | Hart InterCivic | Verity 2.5 |
| Hand Counted Paper Ballot | NO | |

- 13(b). Name the System Service Manufacturer used by the County in this Election **Hart InterCivic**

- 13(c). Describe any discrepancies with your voting system during the election if your County:

None

- 13(d). Name the Election Pollbook system service provider and the system model used by the county in this election:

| System Service Provider | System Model Number(s) |
|-------------------------|------------------------|
| KNOWiNK LLC | PollPad 3.0.1 |

- 13(e). Name the EPB System Service Manufacturer used by the County in this Election: **KNOWiNK LLC**

CEB 9 Summary

ENCLOSURES:

14(a). Describe any malfunction or other problem with your voting system during the election. If your county did not experience any problems, please input "None" in the text box below. **None**

14(b). If you will be sending additional information on the malfunctions to IED, how will it be sent? **No Malfunction**

15. How will you be submitting Certified & Final Precinct Level Results for your county to IED? (Please use the Voter Status Counts by Precinct and Split report from SVRS): **Electronic Submission**

16. If you will be sending any additional information to the Election Division, how will it be sent? **Email**

17. Please enter the name, title and mailing address for your county election board members.

| Title | Name | Party Name | Address & Street | City, State, and Zip | E-mail Address | Phone Number |
|---------------------------------------|------------------|------------|-----------------------------|----------------------|--------------------------|--------------|
| Clerk/Secretary of the Election Board | NICOLE BROWNE | Democratic | 401 W 7TH STREET, SUITE 100 | BLOOMINGTON IN 47404 | nbrowne@co.monroe.in.us | 8123492614 |
| Election Board Chairman | SHRUTI RANA | Democratic | 401 W 7TH STREET, SUITE 100 | BLOOMINGTON IN 47404 | shrutirana@yahoo.com | 8128221543 |
| Election Board Member | DONOVAN GARLETTS | Republican | 401 W 7TH STREET, SUITE 100 | BLOOMINGTON IN 47404 | donovan@limestonefab.com | 2196130876 |
| | | | | | | |
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CEB 9 Summary

Montgomery County

REGISTRATION AND TURNOUT:

1. Number of registered voters in **county** for this election (Note: If the election was held only in part of the county, the number of registered voters in that part of the county for this election): **25503**
2. Number of voters voting *in person at the polls on Election Day*: **2189**
3. Number of all voters voting *absentee including by mail, travel board, in-person, and military and overseas (UOCAVA)*: **1156**
4. Total number of voters who voted in this election (auto-calculated as #2 + #3): **3345**

ABSENTEE VOTING

5. Please enter the number of absentee ballots that were rejected (exclude UOCAVA): **0**
- 5(a). Please enter the number of absentee ballots Not Received (Not returned to your county by the deadline): **22**

UOCAVA (Voters using the Federal Postcard Application and Federal Write-In Absentee Ballots)

6. The combined total number of absentee ballots sent by county to military and overseas voters: **3**
7. Total number of ballots in #6 returned by these voters. (Include any Federal Write-In Absentee Ballots, counted, because a UOCAVA did not return an official county ballot.): **3**
8. Total number of ballots in #7 counted: **3**

PROVISIONAL BALLOTS:

9. Total number of provisional ballots counted by county election board: **0**
10. Total number of provisional ballots not counted by county election board: **4**
11. The total number of provisional ballots cast by voters in the county in this election (System calculated as #9 + #10): **4**

ELECTION BUDGET AND EQUIPMENT:

12. BUDGETED cost for this election. Estimate if necessary: **52,000.00**
- 13(a). Provide the following information for the Election System Type:

| Election System Type | System Service Manufacturer | Voting System Model |
|-------------------------------------|-----------------------------|---------------------|
| Direct Recording Electronic Voting | Unisyn | OpenElect 2.1 |
| Optical Scan Ballot Tabulator | Unisyn | OpenElect 2.1 |
| ADA Compliant Ballot Marking Device | Unisyn | OpenElect 2.1 |
| Election Management System | Unisyn | OpenElect 2.1 |
| Hand Counted Paper Ballot | NO | |

- 13(b). Name the System Service Manufacturer used by the County in this Election **RBM**

- 13(c). Describe any discrepancies with your voting system during the election if your County:

Nothing wrong with any machines or equipment but we are on version OpenElect 2.1 This was not an option in SVRS.

- 13(d). Name the Election Pollbook system service provider and the system model used by the county in this election:

| System Service Provider | System Model Number(s) |
|-------------------------|------------------------|
| VR Systems | EVid Next MH-5100 |

- 13(e). Name the EPB System Service Manufacturer used by the County in this Election: **VR Systems**

CEB 9 Summary

ENCLOSURES:

14(a). Describe any malfunction or other problem with your voting system during the election. If your county did not experience any problems, please input "None" in the text box below. **None**

14(b). If you will be sending additional information on the malfunctions to IED, how will it be sent? **Email**

15. How will you be submitting Certified & Final Precinct Level Results for your county to IED? (Please use the Voter Status Counts by Precinct and Split report from SVRS): **Email**

16. If you will be sending any additional information to the Election Division, how will it be sent? **Email**

17. Please enter the name, title and mailing address for your county election board members.

| Title | Name | Party Name | Address & Street | City, State, and Zip | E-mail Address | Phone Number |
|---------------------------------------|------------------|------------|-------------------|--------------------------|---------------------------------------|--------------|
| Clerk/Secretary of the Election Board | KARYN D DOUGLAS | Republican | 100 E MAIN STREET | CRAWFORDS VILLE IN 47933 | karyn.douglas@montgomerycounty.in.gov | 765-364-6434 |
| Election Board Chairman | DARYL LIVESAY | Republican | 100 E MAIN STREET | CRAWFORDS VILLE IN 47933 | dllivesay49@gmail.com | 765-376-6722 |
| Election Board Member | VIRGINIA SERVIES | Democrat | 100 E MAIN STREET | CRAWFORDS VILLE IN 47933 | vservies@mymetronet.net | 765-362-8308 |
| | | | | | | |
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CEB 9 Summary

Morgan County

REGISTRATION AND TURNOUT:

1. Number of registered voters in **county** for this election (Note: If the election was held only in part of the county, the number of registered voters in that part of the county for this election): **52072**
2. Number of voters voting *in person at the polls on Election Day*: **5010**
3. Number of all voters voting *absentee including by mail, travel board, in-person, and military and overseas (UOCAVA)*: **2848**
4. Total number of voters who voted in this election (auto-calculated as #2 + #3): **7858**

ABSENTEE VOTING

5. Please enter the number of absentee ballots that were rejected (exclude UOCAVA): **3**
- 5(a). Please enter the number of absentee ballots Not Received (Not returned to your county by the deadline): **45**

UOCAVA (Voters using the Federal Postcard Application and Federal Write-In Absentee Ballots)

6. The combined total number of absentee ballots sent by county to military and overseas voters: **4**
7. Total number of ballots in #6 returned by these voters. (Include any Federal Write-In Absentee Ballots, counted, because a UOCAVA did not return an official county ballot.): **4**
8. Total number of ballots in #7 counted: **4**

PROVISIONAL BALLOTS:

9. Total number of provisional ballots counted by county election board: **0**
10. Total number of provisional ballots not counted by county election board: **0**
11. The total number of provisional ballots cast by voters in the county in this election (System calculated as #9 + #10): **0**

ELECTION BUDGET AND EQUIPMENT:

12. BUDGETED cost for this election. Estimate if necessary: **60,000**
- 13(a). Provide the following information for the Election System Type:

| Election System Type | System Service Manufacturer | Voting System Model |
|-------------------------------------|-----------------------------|---------------------|
| Direct Recording Electronic Voting | MicroVote | EMS 4.4 |
| Optical Scan Ballot Tabulator | MicroVote | EMS 4.4 |
| ADA Compliant Ballot Marking Device | MicroVote | EMS 4.4 |
| Election Management System | MicroVote | EMS 4.4 |
| Hand Counted Paper Ballot | NO | |

13(b). Name the System Service Manufacturer used by the County in this Election **MicroVote**

13(c). Describe any discrepancies with your voting system during the election if your County:

None

13(d). Name the Election Pollbook system service provider and the system model used by the county in this election:

| System Service Provider | System Model Number(s) |
|-------------------------|------------------------|
| KNOWiNK LLC | PollPad 2.5.8 |

13(e). Name the EPB System Service Manufacturer used by the County in this Election: **KNOWiNK LLC**

CEB 9 Summary

ENCLOSURES:

14(a). Describe any malfunction or other problem with your voting system during the election. If your county did not experience any problems, please input "None" in the text box below. **None**

14(b). If you will be sending additional information on the malfunctions to IED, how will it be sent? **No Malfunction**

15. How will you be submitting Certified & Final Precinct Level Results for your county to IED? (Please use the Voter Status Counts by Precinct and Split report from SVRS): **Electronic Submission**

16. If you will be sending any additional information to the Election Division, how will it be sent? **Email**

17. Please enter the name, title and mailing address for your county election board members.

| Title | Name | Party Name | Address & Street | City, State, and Zip | E-mail Address | Phone Number |
|---------------------------------------|-------------------|------------|-----------------------|-----------------------|-----------------------------|--------------|
| Clerk/Secretary of the Election Board | STEPHANIE ELLIOTT | Republican | 180 S. MAIN ST. STE 1 | MARTINSVILLE IN 46151 | sellott@morgancounty.in.gov | 7653421029 |
| Election Board Chairman | REBECCA WAYMIRE | Democratic | 180 S. MAIN ST. STE 1 | MARTINSVILLE IN 46151 | bwwaymire@comcast.net | 7653426374 |
| Election Board Member | DAKOTA VANLEEUWEN | Republican | 180 S. MAIN ST. STE 1 | MARTINSVILLE IN 46151 | drv@vanleeuwenlaw.com | 7653421029 |
| | | | | | | |
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CEB 9 Summary

Newton County

REGISTRATION AND TURNOUT:

1. Number of registered voters in **county** for this election (Note: If the election was held only in part of the county, the number of registered voters in that part of the county for this election): **10024**
2. Number of voters voting *in person at the polls on Election Day*: **2077**
3. Number of all voters voting *absentee including by mail, travel board, in-person, and military and overseas (UOCAVA)*: **287**
4. Total number of voters who voted in this election (auto-calculated as #2 + #3): **2364**

ABSENTEE VOTING

5. Please enter the number of absentee ballots that were rejected (exclude UOCAVA): **5**
- 5(a). Please enter the number of absentee ballots Not Received (Not returned to your county by the deadline): **13**

UOCAVA (Voters using the Federal Postcard Application and Federal Write-In Absentee Ballots)

6. The combined total number of absentee ballots sent by county to military and overseas voters: **0**
7. Total number of ballots in #6 returned by these voters. (Include any Federal Write-In Absentee Ballots, counted, because a UOCAVA did not return an official county ballot.): **0**
8. Total number of ballots in #7 counted: **0**

PROVISIONAL BALLOTS:

9. Total number of provisional ballots counted by county election board: **0**
10. Total number of provisional ballots not counted by county election board: **0**
11. The total number of provisional ballots cast by voters in the county in this election (System calculated as #9 + #10): **0**

ELECTION BUDGET AND EQUIPMENT:

12. BUDGETED cost for this election. Estimate if necessary: **30,000**
- 13(a). Provide the following information for the Election System Type:

| Election System Type | System Service Manufacturer | Voting System Model |
|-------------------------------------|-----------------------------|---------------------|
| Direct Recording Electronic Voting | Hart InterCivic | Verity 2.5 |
| Optical Scan Ballot Tabulator | Hart InterCivic | Verity 2.5 |
| ADA Compliant Ballot Marking Device | Hart InterCivic | Verity 2.5 |
| Election Management System | Hart InterCivic | Verity 2.5 |
| Hand Counted Paper Ballot | YES | |

- 13(b). Name the System Service Manufacturer used by the County in this Election **GBS**

- 13(c). Describe any discrepancies with your voting system during the election if your County:

None

- 13(d). Name the Election Pollbook system service provider and the system model used by the county in this election:

| System Service Provider | System Model Number(s) |
|-------------------------|------------------------|
| KNOWiNK LLC | PollPad 3.0.1 |

- 13(e). Name the EPB System Service Manufacturer used by the County in this Election: **MicroVote**

CEB 9 Summary

ENCLOSURES:

14(a). Describe any malfunction or other problem with your voting system during the election. If your county did not experience any problems, please input "None" in the text box below. **None**

14(b). If you will be sending additional information on the malfunctions to IED, how will it be sent? **No Malfunction**

15. How will you be submitting Certified & Final Precinct Level Results for your county to IED? (Please use the Voter Status Counts by Precinct and Split report from SVRS): **Electronic Submission**

16. If you will be sending any additional information to the Election Division, how will it be sent? **Email**

17. Please enter the name, title and mailing address for your county election board members.

| Title | Name | Party Name | Address & Street | City, State, and Zip | E-mail Address | Phone Number |
|---------------------------------------|-------------------|------------|------------------|----------------------|------------------------------|--------------|
| Clerk/Secretary of the Election Board | JESSICA D FIRKINS | Republican | PO BOX 49 | KENTLAND IN 47951 | jfirkins@newtoncounty.in.gov | 2194746081 |
| Election Board Member | VIVIAN FERGUSON | Republican | 201 N THIRD ST | KENTLAND IN 47951 | ferg@embarqmail.com | 2194746134 |
| Election Board Member | TERI PASIERB | Democratic | 201 N THIRD ST | KENTLAND IN 47951 | tpasierb@embarqmail.com | 2198080566 |
| | | | | | | |
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CEB 9 Summary

Noble County

REGISTRATION AND TURNOUT:

1. Number of registered voters in **county** for this election (Note: If the election was held only in part of the county, the number of registered voters in that part of the county for this election): **29921**
2. Number of voters voting *in person at the polls on Election Day*: **2425**
3. Number of all voters voting *absentee including by mail, travel board, in-person, and military and overseas (UOCAVA)*: **923**
4. Total number of voters who voted in this election (auto-calculated as #2 + #3): **3348**

ABSENTEE VOTING

5. Please enter the number of absentee ballots that were rejected (exclude UOCAVA): **5**
- 5(a). Please enter the number of absentee ballots Not Received (Not returned to your county by the deadline): **23**

UOCAVA (Voters using the Federal Postcard Application and Federal Write-In Absentee Ballots)

6. The combined total number of absentee ballots sent by county to military and overseas voters: **0**
7. Total number of ballots in #6 returned by these voters. (Include any Federal Write-In Absentee Ballots, counted, because a UOCAVA did not return an official county ballot.): **0**
8. Total number of ballots in #7 counted: **0**

PROVISIONAL BALLOTS:

9. Total number of provisional ballots counted by county election board: **0**
10. Total number of provisional ballots not counted by county election board: **0**
11. The total number of provisional ballots cast by voters in the county in this election (System calculated as #9 + #10): **0**

ELECTION BUDGET AND EQUIPMENT:

12. BUDGETED cost for this election. Estimate if necessary: **93,000**
- 13(a). Provide the following information for the Election System Type:

| Election System Type | System Service Manufacturer | Voting System Model |
|-------------------------------------|-----------------------------|---------------------|
| Direct Recording Electronic Voting | MicroVote | EMS 4.1 |
| Optical Scan Ballot Tabulator | N/A | N/A |
| ADA Compliant Ballot Marking Device | N/A | N/A |
| Election Management System | MicroVote | EMS 4.1 |
| Hand Counted Paper Ballot | NO | |

13(b). Name the System Service Manufacturer used by the County in this Election **MicroVote**

13(c). Describe any discrepancies with your voting system during the election if your County:

None

13(d). Name the Election Pollbook system service provider and the system model used by the county in this election:

| System Service Provider | System Model Number(s) |
|-------------------------|------------------------|
| KNOWiNK LLC | PollPad 2.5.8 |

13(e). Name the EPB System Service Manufacturer used by the County in this Election: **MicroVote**

CEB 9 Summary

ENCLOSURES:

14(a). Describe any malfunction or other problem with your voting system during the election. If your county did not experience any problems, please input "None" in the text box below. **None**

14(b). If you will be sending additional information on the malfunctions to IED, how will it be sent? **Email**

15. How will you be submitting Certified & Final Precinct Level Results for your county to IED? (Please use the Voter Status Counts by Precinct and Split report from SVRS): **Electronic Submission**

16. If you will be sending any additional information to the Election Division, how will it be sent? **Email**

17. Please enter the name, title and mailing address for your county election board members.

| Title | Name | Party Name | Address & Street | City, State, and Zip | E-mail Address | Phone Number |
|---------------------------------------|----------------|------------|---------------------|----------------------|-------------------------|--------------|
| Election Board Member | RANDY HANDSHOE | Republican | 101 N ORANGE STREET | ALBION IN 46701 | rhandshoe@gmail.com | 2603183144 |
| Election Board Member | LORI JANSEN | Democratic | 101 N ORANGE STREET | ALBION IN 46701 | loriwjansen@hotmail.com | 2606363205 |
| Clerk/Secretary of the Election Board | HOLLY JONES | Republican | 101 N ORANGE STREET | ALBION IN 46701 | hjones@nobleco.us | 2606362736 |
| | | | | | | |
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CEB 9 Summary

Ohio County

REGISTRATION AND TURNOUT:

1. Number of registered voters in **county** for this election (Note: If the election was held only in part of the county, the number of registered voters in that part of the county for this election): **5065**
2. Number of voters voting *in person at the polls on Election Day*: **301**
3. Number of all voters voting *absentee including by mail, travel board, in-person, and military and overseas (UOCAVA)*: **98**
4. Total number of voters who voted in this election (auto-calculated as #2 + #3): **399**

ABSENTEE VOTING

5. Please enter the number of absentee ballots that were rejected (exclude UOCAVA): **0**
- 5(a). Please enter the number of absentee ballots Not Received (Not returned to your county by the deadline): **1**

UOCAVA (Voters using the Federal Postcard Application and Federal Write-In Absentee Ballots)

6. The combined total number of absentee ballots sent by county to military and overseas voters: **0**
7. Total number of ballots in #6 returned by these voters. (Include any Federal Write-In Absentee Ballots, counted, because a UOCAVA did not return an official county ballot.): **0**
8. Total number of ballots in #7 counted: **0**

PROVISIONAL BALLOTS:

9. Total number of provisional ballots counted by county election board: **0**
10. Total number of provisional ballots not counted by county election board: **0**
11. The total number of provisional ballots cast by voters in the county in this election (System calculated as #9 + #10): **0**

ELECTION BUDGET AND EQUIPMENT:

12. BUDGETED cost for this election. Estimate if necessary: **13,490.00**
- 13(a). Provide the following information for the Election System Type:

| Election System Type | System Service Manufacturer | Voting System Model |
|-------------------------------------|-----------------------------|---------------------|
| Direct Recording Electronic Voting | Hart InterCivic | Verity 2.5 |
| Optical Scan Ballot Tabulator | Hart InterCivic | Verity 2.5 |
| ADA Compliant Ballot Marking Device | Hart InterCivic | Verity 2.5 |
| Election Management System | Hart InterCivic | Verity 2.5 |
| Hand Counted Paper Ballot | NO | |

- 13(b). Name the System Service Manufacturer used by the County in this Election **Hart InterCivic**

- 13(c). Describe any discrepancies with your voting system during the election if your County:

None

- 13(d). Name the Election Pollbook system service provider and the system model used by the county in this election:

| System Service Provider | System Model Number(s) |
|-------------------------|------------------------|
| KNOWiNK LLC | PollPad 2.5 |

- 13(e). Name the EPB System Service Manufacturer used by the County in this Election: **KNOWiNK LLC**

CEB 9 Summary

ENCLOSURES:

14(a). Describe any malfunction or other problem with your voting system during the election. If your county did not experience any problems, please input "None" in the text box below. **None**

14(b). If you will be sending additional information on the malfunctions to IED, how will it be sent? **No Malfunction**

15. How will you be submitting Certified & Final Precinct Level Results for your county to IED? (Please use the Voter Status Counts by Precinct and Split report from SVRS): **Electronic Submission**

16. If you will be sending any additional information to the Election Division, how will it be sent? **Fax**

17. Please enter the name, title and mailing address for your county election board members.

| Title | Name | Party Name | Address & Street | City, State, and Zip | E-mail Address | Phone Number |
|---------------------------------------|-----------------------|------------|------------------|----------------------|-------------------------------|--------------|
| Clerk/Secretary of the Election Board | JAMIE SUE STEGEMILLER | Republican | P.O. BOX 185 | RISING SUN IN 47040 | Jstegemiller@ohiocountyin.gov | 8124382610 |
| Election Board Member | ROBERT WHITE | Republican | P.O. BOX 185 | RISING SUN IN 47040 | NA | 8124382610 |
| Election Board Member | PAMELA MCCLURE | Democrat | P.O. BOX 185 | RISING SUN IN 47040 | ohiocountydems@gmail.com | 8124382610 |
| | | | | | | |
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CEB 9 Summary

Orange County

REGISTRATION AND TURNOUT:

1. Number of registered voters in **county** for this election (Note: If the election was held only in part of the county, the number of registered voters in that part of the county for this election): **13989**
2. Number of voters voting *in person at the polls on Election Day*: **2701**
3. Number of all voters voting *absentee including by mail, travel board, in-person, and military and overseas (UOCAVA)*: **438**
4. Total number of voters who voted in this election (auto-calculated as #2 + #3): **3139**

ABSENTEE VOTING

5. Please enter the number of absentee ballots that were rejected (exclude UOCAVA): **0**
- 5(a). Please enter the number of absentee ballots Not Received (Not returned to your county by the deadline): **3**

UOCAVA (Voters using the Federal Postcard Application and Federal Write-In Absentee Ballots)

6. The combined total number of absentee ballots sent by county to military and overseas voters: **0**
7. Total number of ballots in #6 returned by these voters. (Include any Federal Write-In Absentee Ballots, counted, because a UOCAVA did not return an official county ballot.): **0**
8. Total number of ballots in #7 counted: **0**

PROVISIONAL BALLOTS:

9. Total number of provisional ballots counted by county election board: **0**
10. Total number of provisional ballots not counted by county election board: **3**
11. The total number of provisional ballots cast by voters in the county in this election (System calculated as #9 + #10): **3**

ELECTION BUDGET AND EQUIPMENT:

12. BUDGETED cost for this election. Estimate if necessary: **38,865.00**
- 13(a). Provide the following information for the Election System Type:

| Election System Type | System Service Manufacturer | Voting System Model |
|-------------------------------------|-----------------------------|---------------------|
| Direct Recording Electronic Voting | MicroVote | EMS 4.4 |
| Optical Scan Ballot Tabulator | MicroVote | EMS 4.4 |
| ADA Compliant Ballot Marking Device | MicroVote | EMS 4.4 |
| Election Management System | MicroVote | EMS 4.4 |
| Hand Counted Paper Ballot | NO | |

13(b). Name the System Service Manufacturer used by the County in this Election **MicroVote**

13(c). Describe any discrepancies with your voting system during the election if your County:

None

13(d). Name the Election Pollbook system service provider and the system model used by the county in this election:

| System Service Provider | System Model Number(s) |
|-------------------------|------------------------|
| KNOWiNK LLC | PollPad 3.0.1 |

13(e). Name the EPB System Service Manufacturer used by the County in this Election: **MicroVote**

CEB 9 Summary

ENCLOSURES:

14(a). Describe any malfunction or other problem with your voting system during the election. If your county did not experience any problems, please input "None" in the text box below. **None**

14(b). If you will be sending additional information on the malfunctions to IED, how will it be sent? **No Malfunction**

15. How will you be submitting Certified & Final Precinct Level Results for your county to IED? (Please use the Voter Status Counts by Precinct and Split report from SVRS): **Email**

16. If you will be sending any additional information to the Election Division, how will it be sent? **Email**

17. Please enter the name, title and mailing address for your county election board members.

| Title | Name | Party Name | Address & Street | City, State, and Zip | E-mail Address | Phone Number |
|---------------------------------------|-----------------|------------|---------------------|----------------------|-----------------------------|--------------|
| Clerk/Secretary of the Election Board | ELIZABETH JONES | Republican | 1 Court Street | PAOLI IN 47454 | countyclerk@co.orange.in.us | 812-723-2649 |
| Election Board Member | MARTHA NICE | Democrat | 623 W. Water Street | PAOLI IN 47454 | mnice@blueriver.net | 812-521-1615 |
| Election Board Member | WES WHITFIELD | Republican | 765 S Thompson Lane | PAOLI IN 47454 | weswhitfield1984@gmail.com | 812-865-6333 |
| | | | | | | |
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CEB 9 Summary

Owen County

REGISTRATION AND TURNOUT:

1. Number of registered voters in **county** for this election (Note: If the election was held only in part of the county, the number of registered voters in that part of the county for this election): **14900**
2. Number of voters voting *in person at the polls on Election Day*: **1967**
3. Number of all voters voting *absentee including by mail, travel board, in-person, and military and overseas (UOCAVA)*: **1005**
4. Total number of voters who voted in this election (auto-calculated as #2 + #3): **2972**

ABSENTEE VOTING

5. Please enter the number of absentee ballots that were rejected (exclude UOCAVA): **2**
- 5(a). Please enter the number of absentee ballots Not Received (Not returned to your county by the deadline): **11**

UOCAVA (Voters using the Federal Postcard Application and Federal Write-In Absentee Ballots)

6. The combined total number of absentee ballots sent by county to military and overseas voters: **3**
7. Total number of ballots in #6 returned by these voters. (Include any Federal Write-In Absentee Ballots, counted, because a UOCAVA did not return an official county ballot.): **3**
8. Total number of ballots in #7 counted: **3**

PROVISIONAL BALLOTS:

9. Total number of provisional ballots counted by county election board: **2**
10. Total number of provisional ballots not counted by county election board: **0**
11. The total number of provisional ballots cast by voters in the county in this election (System calculated as #9 + #10): **2**

ELECTION BUDGET AND EQUIPMENT:

12. BUDGETED cost for this election. Estimate if necessary: **19,000**
- 13(a). Provide the following information for the Election System Type:

| Election System Type | System Service Manufacturer | Voting System Model |
|-------------------------------------|-----------------------------|---------------------|
| Direct Recording Electronic Voting | MicroVote | EMS 4.4 |
| Optical Scan Ballot Tabulator | MicroVote | EMS 4.4 |
| ADA Compliant Ballot Marking Device | MicroVote | EMS 4.4 |
| Election Management System | MicroVote | EMS 4.4 |
| Hand Counted Paper Ballot | NO | |

- 13(b). Name the System Service Manufacturer used by the County in this Election **MicroVote**

- 13(c). Describe any discrepancies with your voting system during the election if your County:

None

- 13(d). Name the Election Pollbook system service provider and the system model used by the county in this election:

| System Service Provider | System Model Number(s) |
|-------------------------|------------------------|
| KNOWiNK LLC | PollPad 2.5.8 |

- 13(e). Name the EPB System Service Manufacturer used by the County in this Election: **KNOWiNK LLC**

CEB 9 Summary

ENCLOSURES:

14(a). Describe any malfunction or other problem with your voting system during the election. If your county did not experience any problems, please input "None" in the text box below. **None**

14(b). If you will be sending additional information on the malfunctions to IED, how will it be sent? **No Malfunction**

15. How will you be submitting Certified & Final Precinct Level Results for your county to IED? (Please use the Voter Status Counts by Precinct and Split report from SVRS): **Electronic Submission**

16. If you will be sending any additional information to the Election Division, how will it be sent? **USPS or Courier**

17. Please enter the name, title and mailing address for your county election board members.

| Title | Name | Party Name | Address & Street | City, State, and Zip | E-mail Address | Phone Number |
|---------------------------------------|-----------------|------------|------------------|----------------------|-----------------------------------|--------------|
| Clerk/Secretary of the Election Board | LESLIANN SHEESE | Republican | PO BOX 146 | SPENCER IN 47460 | lesliann.sheese@owencounty.in.gov | 8128295015 |
| Election Board Chairman | RODGER SAMUELS | Republican | P O BOX 146 | SPENCER IN 47460 | sam41467@sbcglobal.net | 8128219020 |
| Election Board Member | ED O'BRIEN | Democratic | P O BOX 146 | SPENCER IN 47460 | na | 8128213217 |
| | | | | | | |
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CEB 9 Summary

Parke County

REGISTRATION AND TURNOUT:

1. Number of registered voters in **county** for this election (Note: If the election was held only in part of the county, the number of registered voters in that part of the county for this election): **10100**
2. Number of voters voting *in person at the polls on Election Day*: **2525**
3. Number of all voters voting *absentee including by mail, travel board, in-person, and military and overseas (UOCAVA)*: **765**
4. Total number of voters who voted in this election (auto-calculated as #2 + #3): **3290**

ABSENTEE VOTING

5. Please enter the number of absentee ballots that were rejected (exclude UOCAVA): **0**
- 5(a). Please enter the number of absentee ballots Not Received (Not returned to your county by the deadline): **9**

UOCAVA (Voters using the Federal Postcard Application and Federal Write-In Absentee Ballots)

6. The combined total number of absentee ballots sent by county to military and overseas voters: **1**
7. Total number of ballots in #6 returned by these voters. (Include any Federal Write-In Absentee Ballots, counted, because a UOCAVA did not return an official county ballot.): **1**
8. Total number of ballots in #7 counted: **1**

PROVISIONAL BALLOTS:

9. Total number of provisional ballots counted by county election board: **0**
10. Total number of provisional ballots not counted by county election board: **1**
11. The total number of provisional ballots cast by voters in the county in this election (System calculated as #9 + #10): **1**

ELECTION BUDGET AND EQUIPMENT:

12. BUDGETED cost for this election. Estimate if necessary: **34,675**
- 13(a). Provide the following information for the Election System Type:

| Election System Type | System Service Manufacturer | Voting System Model |
|-------------------------------------|-----------------------------|---------------------|
| Direct Recording Electronic Voting | MicroVote | EMS 4.4 |
| Optical Scan Ballot Tabulator | MicroVote | EMS 4.4 |
| ADA Compliant Ballot Marking Device | MicroVote | EMS 4.4 |
| Election Management System | MicroVote | EMS 4.4 |
| Hand Counted Paper Ballot | YES | |

13(b). Name the System Service Manufacturer used by the County in this Election **MicroVote**

13(c). Describe any discrepancies with your voting system during the election if your County:

None

13(d). Name the Election Pollbook system service provider and the system model used by the county in this election:

| System Service Provider | System Model Number(s) |
|-------------------------|------------------------|
| KNOWiNK LLC | PollPad 3.0.1 |

13(e). Name the EPB System Service Manufacturer used by the County in this Election: **KNOWiNK LLC**

CEB 9 Summary

ENCLOSURES:

14(a). Describe any malfunction or other problem with your voting system during the election. If your county did not experience any problems, please input "None" in the text box below. **None**

14(b). If you will be sending additional information on the malfunctions to IED, how will it be sent? **No Malfunction**

15. How will you be submitting Certified & Final Precinct Level Results for your county to IED? (Please use the Voter Status Counts by Precinct and Split report from SVRS): **Electronic Submission**

16. If you will be sending any additional information to the Election Division, how will it be sent? **USPS or Courier**

17. Please enter the name, title and mailing address for your county election board members.

| Title | Name | Party Name | Address & Street | City, State, and Zip | E-mail Address | Phone Number |
|---------------------------------------|----------------|------------|------------------------------|-------------------------|----------------------------|--------------|
| Clerk/Secretary of the Election Board | HENRY HARPER | Republican | 116 W. HIGH STREET, ROOM 204 | ROCKVILLE IN 47872-1781 | pcclerk@parkecounty-in.gov | 7655695132 |
| Election Board Chairman | STACEY PERRINE | Democratic | 116 W. HIGH STREET, ROOM 204 | ROCKVILLE IN 47872-1781 | pcclerk@parkecounty-in.gov | 7655695132 |
| Election Board Member | RANDY WRIGHT | Republican | 116 W. HIGH STREET, ROOM 204 | ROCKVILLE IN 47872-1781 | pcclerk@parkecounty-in.gov | 7655695132 |
| | | | | | | |
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CEB 9 Summary

Perry County

REGISTRATION AND TURNOUT:

1. Number of registered voters in **county** for this election (Note: If the election was held only in part of the county, the number of registered voters in that part of the county for this election): **13091**
2. Number of voters voting *in person at the polls on Election Day*: **469**
3. Number of all voters voting *absentee including by mail, travel board, in-person, and military and overseas (UOCAVA)*: **278**
4. Total number of voters who voted in this election (auto-calculated as #2 + #3): **747**

ABSENTEE VOTING

5. Please enter the number of absentee ballots that were rejected (exclude UOCAVA): **0**
- 5(a). Please enter the number of absentee ballots Not Received (Not returned to your county by the deadline): **7**

UOCAVA (Voters using the Federal Postcard Application and Federal Write-In Absentee Ballots)

6. The combined total number of absentee ballots sent by county to military and overseas voters: **0**
7. Total number of ballots in #6 returned by these voters. (Include any Federal Write-In Absentee Ballots, counted, because a UOCAVA did not return an official county ballot.): **0**
8. Total number of ballots in #7 counted: **0**

PROVISIONAL BALLOTS:

9. Total number of provisional ballots counted by county election board: **0**
10. Total number of provisional ballots not counted by county election board: **0**
11. The total number of provisional ballots cast by voters in the county in this election (System calculated as #9 + #10): **0**

ELECTION BUDGET AND EQUIPMENT:

12. BUDGETED cost for this election. Estimate if necessary: **38,000.00**
- 13(a). Provide the following information for the Election System Type:

| Election System Type | System Service Manufacturer | Voting System Model |
|-------------------------------------|-----------------------------|---------------------|
| Direct Recording Electronic Voting | MicroVote | EMS 4.4 |
| Optical Scan Ballot Tabulator | MicroVote | EMS 4.4 |
| ADA Compliant Ballot Marking Device | MicroVote | EMS 4.4 |
| Election Management System | MicroVote | EMS 4.4 |
| Hand Counted Paper Ballot | NO | |

- 13(b). Name the System Service Manufacturer used by the County in this Election **MicroVote**

- 13(c). Describe any discrepancies with your voting system during the election if your County:
None

- 13(d). Name the Election Pollbook system service provider and the system model used by the county in this election:

| System Service Provider | System Model Number(s) |
|-------------------------|------------------------|
| KNOWiNK LLC | PollPad 3.0.1 |

- 13(e). Name the EPB System Service Manufacturer used by the County in this Election: **KNOWiNK LLC**

CEB 9 Summary

ENCLOSURES:

14(a). Describe any malfunction or other problem with your voting system during the election. If your county did not experience any problems, please input "None" in the text box below. **None**

14(b). If you will be sending additional information on the malfunctions to IED, how will it be sent? **No Malfunction**

15. How will you be submitting Certified & Final Precinct Level Results for your county to IED? (Please use the Voter Status Counts by Precinct and Split report from SVRS): **Email**

16. If you will be sending any additional information to the Election Division, how will it be sent? **Email**

17. Please enter the name, title and mailing address for your county election board members.

| Title | Name | Party Name | Address & Street | City, State, and Zip | E-mail Address | Phone Number |
|---------------------------------------|----------------|------------|-------------------|----------------------|--------------------------|--------------|
| Clerk/Secretary of the Election Board | RACHEL K EAST | Democrat | 2219 PAYNE STREET | TELL CITY IN 47586 | clerk@perrycounty.in.gov | 8125473741 |
| Election Board Member | MARY KAY ELDER | Democrat | 2219 PAYNE STREET | TELL CITY IN 47586 | celder@psci.net | 8126080220 |
| Election Board Member | A LLYNN ENMEN | Republican | 2219 PAYNE STREET | TELL CITY IN 47586 | llynnenmen@hotmail.com | 8126080494 |
| | | | | | | |
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CEB 9 Summary

Pike County

REGISTRATION AND TURNOUT:

1. Number of registered voters in **county** for this election (Note: If the election was held only in part of the county, the number of registered voters in that part of the county for this election): **9082**
2. Number of voters voting *in person at the polls on Election Day*: **779**
3. Number of all voters voting *absentee including by mail, travel board, in-person, and military and overseas (UOCAVA)*: **696**
4. Total number of voters who voted in this election (auto-calculated as #2 + #3): **1475**

ABSENTEE VOTING

5. Please enter the number of absentee ballots that were rejected (exclude UOCAVA): **0**
- 5(a). Please enter the number of absentee ballots Not Received (Not returned to your county by the deadline): **28**

UOCAVA (Voters using the Federal Postcard Application and Federal Write-In Absentee Ballots)

6. The combined total number of absentee ballots sent by county to military and overseas voters: **0**
7. Total number of ballots in #6 returned by these voters. (Include any Federal Write-In Absentee Ballots, counted, because a UOCAVA did not return an official county ballot.): **0**
8. Total number of ballots in #7 counted: **0**

PROVISIONAL BALLOTS:

9. Total number of provisional ballots counted by county election board: **0**
10. Total number of provisional ballots not counted by county election board: **0**
11. The total number of provisional ballots cast by voters in the county in this election (System calculated as #9 + #10): **0**

ELECTION BUDGET AND EQUIPMENT:

12. BUDGETED cost for this election. Estimate if necessary: **24,800.00**
- 13(a). Provide the following information for the Election System Type:

| Election System Type | System Service Manufacturer | Voting System Model |
|-------------------------------------|-----------------------------|---------------------|
| Direct Recording Electronic Voting | MicroVote | EMS 4.4 |
| Optical Scan Ballot Tabulator | MicroVote | EMS 4.4 |
| ADA Compliant Ballot Marking Device | MicroVote | EMS 4.4 |
| Election Management System | MicroVote | EMS 4.4 |
| Hand Counted Paper Ballot | YES | |

13(b). Name the System Service Manufacturer used by the County in this Election **MicroVote**

13(c). Describe any discrepancies with your voting system during the election if your County:

None

13(d). Name the Election Pollbook system service provider and the system model used by the county in this election:

| System Service Provider | System Model Number(s) |
|-------------------------|------------------------|
| KNOWiNK LLC | PollPad 3.0.1 |

13(e). Name the EPB System Service Manufacturer used by the County in this Election: **KNOWiNK LLC**

CEB 9 Summary

ENCLOSURES:

14(a). Describe any malfunction or other problem with your voting system during the election. If your county did not experience any problems, please input "None" in the text box below. **None**

14(b). If you will be sending additional information on the malfunctions to IED, how will it be sent? **No Malfunction**

15. How will you be submitting Certified & Final Precinct Level Results for your county to IED? (Please use the Voter Status Counts by Precinct and Split report from SVRS): **Electronic Submission**

16. If you will be sending any additional information to the Election Division, how will it be sent? **Email**

17. Please enter the name, title and mailing address for your county election board members.

| Title | Name | Party Name | Address & Street | City, State, and Zip | E-mail Address | Phone Number |
|---------------------------------------|---------------|------------|------------------|--------------------------|---------------------------|--------------|
| Clerk/Secretary of the Election Board | LANA GRIFFITH | Republican | PO BOX 125 | PETERSBURG IN 47567-0125 | pcclerk@pikecounty.in.gov | 8125822919 |
| Election Board Chairman | EDWIN BOYD | Republican | PO BOX 125 | PETERSBURG IN 47567-0125 | n/a | 8123546025 |
| Election Board Member | WILMA JONES | Democrat | PO BOX 125 | PETERSBURG IN 47567-0125 | n/a | 8123546025 |
| | | | | | | |
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CEB 9 Summary

Porter County

REGISTRATION AND TURNOUT:

1. Number of registered voters in **county** for this election (Note: If the election was held only in part of the county, the number of registered voters in that part of the county for this election): **131660**
2. Number of voters voting *in person at the polls on Election Day*: **15201**
3. Number of all voters voting *absentee including by mail, travel board, in-person, and military and overseas (UOCAVA)*: **6555**
4. Total number of voters who voted in this election (auto-calculated as #2 + #3): **21756**

ABSENTEE VOTING

5. Please enter the number of absentee ballots that were rejected (exclude UOCAVA): **42**
- 5(a). Please enter the number of absentee ballots Not Received (Not returned to your county by the deadline): **42**

UOCAVA (Voters using the Federal Postcard Application and Federal Write-In Absentee Ballots)

6. The combined total number of absentee ballots sent by county to military and overseas voters: **22**
7. Total number of ballots in #6 returned by these voters. (Include any Federal Write-In Absentee Ballots, counted, because a UOCAVA did not return an official county ballot.): **14**
8. Total number of ballots in #7 counted: **13**

PROVISIONAL BALLOTS:

9. Total number of provisional ballots counted by county election board: **11**
10. Total number of provisional ballots not counted by county election board: **14**
11. The total number of provisional ballots cast by voters in the county in this election (System calculated as #9 + #10): **25**

ELECTION BUDGET AND EQUIPMENT:

12. BUDGETED cost for this election. Estimate if necessary: **500,000**
- 13(a). Provide the following information for the Election System Type:

| Election System Type | System Service Manufacturer | Voting System Model |
|-------------------------------------|-----------------------------|---------------------|
| Direct Recording Electronic Voting | ES&S | EVS 5.2.2.0 |
| Optical Scan Ballot Tabulator | ES&S | EVS 5.2.2.0 |
| ADA Compliant Ballot Marking Device | ES&S | EVS 5.2.2.0 |
| Election Management System | ES&S | EVS 5.2.2.0 |
| Hand Counted Paper Ballot | NO | |

- 13(b). Name the System Service Manufacturer used by the County in this Election **ES&S**

- 13(c). Describe any discrepancies with your voting system during the election if your County:
None

- 13(d). Name the Election Pollbook system service provider and the system model used by the county in this election:

| System Service Provider | System Model Number(s) |
|-------------------------|------------------------|
| ES&S | ExpressPoll 3.2.2.1 |

- 13(e). Name the EPB System Service Manufacturer used by the County in this Election: **ES&S**

CEB 9 Summary

ENCLOSURES:

14(a). Describe any malfunction or other problem with your voting system during the election. If your county did not experience any problems, please input "None" in the text box below. **None**

14(b). If you will be sending additional information on the malfunctions to IED, how will it be sent? **Email**

15. How will you be submitting Certified & Final Precinct Level Results for your county to IED? (Please use the Voter Status Counts by Precinct and Split report from SVRS): **Electronic Submission**

16. If you will be sending any additional information to the Election Division, how will it be sent? **Email**

17. Please enter the name, title and mailing address for your county election board members.

| Title | Name | Party Name | Address & Street | City, State, and Zip | E-mail Address | Phone Number |
|---------------------------------------|----------------|------------|--------------------------|----------------------|-----------------------------|--------------|
| Clerk/Secretary of the Election Board | JESSICA BAILEY | Democrat | 155 INDIANA AVE, STE 105 | VALPARAISO IN 46383 | jessica.bailey@porterco.org | 2194653450 |
| Election Board Chairman | PAUL RAUSCH | Democrat | 155 INDIANA AVE, STE 105 | VALPARAISO IN 46383 | pwrausch@gmail.com | 2194653450 |
| Election Board Member | ETHAN LOWE | Republican | 155 INDIANA AVE, STE 105 | VALPARAISO IN 46383 | eslowe2006@gmail.com | 2194653450 |
| Election Board Member | DAVID BENGIS | Republican | 155 INDIANA AVE, STE 105 | VALPARAISO IN 46383 | dbengis@mlg-defaultlaw.com | 2194653450 |
| Election Board Member | JEFF CHIDESTER | Democrat | 155 INDIANA AVE, STE 105 | VALPARAISO IN 46383 | chidesterjl@comcast.net | 2194653450 |

CEB 9 Summary

Posey County

REGISTRATION AND TURNOUT:

1. Number of registered voters in **county** for this election (Note: If the election was held only in part of the county, the number of registered voters in that part of the county for this election): **18327**
2. Number of voters voting *in person at the polls on Election Day*: **2029**
3. Number of all voters voting *absentee including by mail, travel board, in-person, and military and overseas (UOCAVA)*: **732**
4. Total number of voters who voted in this election (auto-calculated as #2 + #3): **2761**

ABSENTEE VOTING

5. Please enter the number of absentee ballots that were rejected (exclude UOCAVA): **0**
- 5(a). Please enter the number of absentee ballots Not Received (Not returned to your county by the deadline): **3**

UOCAVA (Voters using the Federal Postcard Application and Federal Write-In Absentee Ballots)

6. The combined total number of absentee ballots sent by county to military and overseas voters: **1**
7. Total number of ballots in #6 returned by these voters. (Include any Federal Write-In Absentee Ballots, counted, because a UOCAVA did not return an official county ballot.): **1**
8. Total number of ballots in #7 counted: **1**

PROVISIONAL BALLOTS:

9. Total number of provisional ballots counted by county election board: **1**
10. Total number of provisional ballots not counted by county election board: **0**
11. The total number of provisional ballots cast by voters in the county in this election (System calculated as #9 + #10): **1**

ELECTION BUDGET AND EQUIPMENT:

12. BUDGETED cost for this election. Estimate if necessary: **106,000.00**
- 13(a). Provide the following information for the Election System Type:

| Election System Type | System Service Manufacturer | Voting System Model |
|-------------------------------------|-----------------------------|---------------------|
| Direct Recording Electronic Voting | N/A | N/A |
| Optical Scan Ballot Tabulator | Unisyn | OpenElect 2.0A |
| ADA Compliant Ballot Marking Device | Unisyn | OpenElect 2.0A |
| Election Management System | Unisyn | OpenElect 2.0A |
| Hand Counted Paper Ballot | NO | |

- 13(b). Name the System Service Manufacturer used by the County in this Election **RBM**

- 13(c). Describe any discrepancies with your voting system during the election if your County:

None

- 13(d). Name the Election Pollbook system service provider and the system model used by the county in this election:

| System Service Provider | System Model Number(s) |
|-------------------------|------------------------|
| VR Systems | EVid 2.2 |

- 13(e). Name the EPB System Service Manufacturer used by the County in this Election: **VR Systems**

CEB 9 Summary

ENCLOSURES:

14(a). Describe any malfunction or other problem with your voting system during the election. If your county did not experience any problems, please input "None" in the text box below. **None**

14(b). If you will be sending additional information on the malfunctions to IED, how will it be sent? **No Malfunction**

15. How will you be submitting Certified & Final Precinct Level Results for your county to IED? (Please use the Voter Status Counts by Precinct and Split report from SVRS): **Electronic Submission**

16. If you will be sending any additional information to the Election Division, how will it be sent? **Electronic Submission**

17. Please enter the name, title and mailing address for your county election board members.

| Title | Name | Party Name | Address & Street | City, State, and Zip | E-mail Address | Phone Number |
|---------------------------------------|----------------|------------|---------------------------|-----------------------|-------------------------------|--------------|
| Clerk/Secretary of the Election Board | KAY KILGORE | Republican | 300 MAIN ST., ROOM 115 | MT VERNON IN 47620 | kay.kilgore@poseycountyin.gov | 8128381306 |
| Election Board Chairman | BETH SCHILLING | Republican | 300 MAIN ST., ROOM 115 | MT VERNON IN 47620 | beth@swindiana.net | 8127810450 |
| Election Board Member | SCOTT MOYE | Democratic | 300 MAIN ST., ROOM 115 | MT VERNON IN 47620 | scott.moye1@icloud.com | 8124318238 |
| | | | | | | |
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CEB 9 Summary

Pulaski County

REGISTRATION AND TURNOUT:

1. Number of registered voters in **county** for this election (Note: If the election was held only in part of the county, the number of registered voters in that part of the county for this election): **9098**
2. Number of voters voting *in person at the polls on Election Day*: **1431**
3. Number of all voters voting *absentee including by mail, travel board, in-person, and military and overseas (UOCAVA)*: **544**
4. Total number of voters who voted in this election (auto-calculated as #2 + #3): **1975**

ABSENTEE VOTING

5. Please enter the number of absentee ballots that were rejected (exclude UOCAVA): **1**
- 5(a). Please enter the number of absentee ballots Not Received (Not returned to your county by the deadline): **8**

UOCAVA (Voters using the Federal Postcard Application and Federal Write-In Absentee Ballots)

6. The combined total number of absentee ballots sent by county to military and overseas voters: **0**
7. Total number of ballots in #6 returned by these voters. (Include any Federal Write-In Absentee Ballots, counted, because a UOCAVA did not return an official county ballot.): **0**
8. Total number of ballots in #7 counted: **0**

PROVISIONAL BALLOTS:

9. Total number of provisional ballots counted by county election board: **3**
10. Total number of provisional ballots not counted by county election board: **0**
11. The total number of provisional ballots cast by voters in the county in this election (System calculated as #9 + #10): **3**

ELECTION BUDGET AND EQUIPMENT:

12. BUDGETED cost for this election. Estimate if necessary: **32,900**
- 13(a). Provide the following information for the Election System Type:

| Election System Type | System Service Manufacturer | Voting System Model |
|-------------------------------------|-----------------------------|---------------------|
| Direct Recording Electronic Voting | MicroVote | EMS 4.4 |
| Optical Scan Ballot Tabulator | MicroVote | EMS 4.4 |
| ADA Compliant Ballot Marking Device | MicroVote | EMS 4.4 |
| Election Management System | MicroVote | EMS 4.4 |
| Hand Counted Paper Ballot | YES | |

13(b). Name the System Service Manufacturer used by the County in this Election **KNOWiNK LLC**

13(c). Describe any discrepancies with your voting system during the election if your County:

None

13(d). Name the Election Pollbook system service provider and the system model used by the county in this election:

| System Service Provider | System Model Number(s) |
|-------------------------|------------------------|
| KNOWiNK LLC | PollPad 2.5.8 |

13(e). Name the EPB System Service Manufacturer used by the County in this Election: **KNOWiNK LLC**

CEB 9 Summary

ENCLOSURES:

14(a). Describe any malfunction or other problem with your voting system during the election. If your county did not experience any problems, please input "None" in the text box below. **None**

14(b). If you will be sending additional information on the malfunctions to IED, how will it be sent? **No Malfunction**

15. How will you be submitting Certified & Final Precinct Level Results for your county to IED? (Please use the Voter Status Counts by Precinct and Split report from SVRS): **Electronic Submission**

16. If you will be sending any additional information to the Election Division, how will it be sent? **Email**

17. Please enter the name, title and mailing address for your county election board members.

| Title | Name | Party Name | Address & Street | City, State, and Zip | E-mail Address | Phone Number |
|---------------------------------------|----------------|------------|--------------------------------|-----------------------|-----------------------------------|--------------|
| Clerk/Secretary of the Election Board | JOLYNN BEHNY | Republican | 112 EAST MAIN STREET, ROOM 230 | WINAMAC IN 46996-1344 | pulaskiclerk@pulaskicounty.in.gov | 5749463313 |
| Election Board Chairman | KIMBERLY BURKE | Republican | 514 N 48 E | WINAMAC IN 46996 | billing@townofwinamac.com | 5749463451 |
| Election Board Member | JESSYE GILLEY | Democrat | 112 EAST MAIN STREET, ROOM 230 | WINAMAC IN 46996-1344 | newgendems@gmail.com | 5749464401 |
| | | | | | | |
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CEB 9 Summary

Putnam County

REGISTRATION AND TURNOUT:

1. Number of registered voters in **county** for this election (Note: If the election was held only in part of the county, the number of registered voters in that part of the county for this election): **24057**
2. Number of voters voting *in person at the polls on Election Day*: **3644**
3. Number of all voters voting *absentee including by mail, travel board, in-person, and military and overseas (UOCAVA)*: **1189**
4. Total number of voters who voted in this election (auto-calculated as #2 + #3): **4833**

ABSENTEE VOTING

5. Please enter the number of absentee ballots that were rejected (exclude UOCAVA): **3**
- 5(a). Please enter the number of absentee ballots Not Received (Not returned to your county by the deadline): **4**

UOCAVA (Voters using the Federal Postcard Application and Federal Write-In Absentee Ballots)

6. The combined total number of absentee ballots sent by county to military and overseas voters: **3**
7. Total number of ballots in #6 returned by these voters. (Include any Federal Write-In Absentee Ballots, counted, because a UOCAVA did not return an official county ballot.): **3**
8. Total number of ballots in #7 counted: **3**

PROVISIONAL BALLOTS:

9. Total number of provisional ballots counted by county election board: **0**
10. Total number of provisional ballots not counted by county election board: **0**
11. The total number of provisional ballots cast by voters in the county in this election (System calculated as #9 + #10): **0**

ELECTION BUDGET AND EQUIPMENT:

12. BUDGETED cost for this election. Estimate if necessary: **40,000.00**
- 13(a). Provide the following information for the Election System Type:

| Election System Type | System Service Manufacturer | Voting System Model |
|-------------------------------------|-----------------------------|---------------------|
| Direct Recording Electronic Voting | MicroVote | EMS 4.4 |
| Optical Scan Ballot Tabulator | MicroVote | EMS 4.4 |
| ADA Compliant Ballot Marking Device | MicroVote | EMS 4.4 |
| Election Management System | MicroVote | EMS 4.4 |
| Hand Counted Paper Ballot | YES | |

- 13(b). Name the System Service Manufacturer used by the County in this Election **MicroVote**

- 13(c). Describe any discrepancies with your voting system during the election if your County:
None

- 13(d). Name the Election Pollbook system service provider and the system model used by the county in this election:

| System Service Provider | System Model Number(s) |
|-------------------------|------------------------|
| KNOWiNK LLC | PollPad 3.0.1 |

- 13(e). Name the EPB System Service Manufacturer used by the County in this Election: **KNOWiNK LLC**

CEB 9 Summary

ENCLOSURES:

14(a). Describe any malfunction or other problem with your voting system during the election. If your county did not experience any problems, please input "None" in the text box below. **None**

14(b). If you will be sending additional information on the malfunctions to IED, how will it be sent? **USPS or Courier**

15. How will you be submitting Certified & Final Precinct Level Results for your county to IED? (Please use the Voter Status Counts by Precinct and Split report from SVRS): **Electronic Submission**

16. If you will be sending any additional information to the Election Division, how will it be sent? **USPS or Courier**

17. Please enter the name, title and mailing address for your county election board members.

| Title | Name | Party Name | Address & Street | City, State, and Zip | E-mail Address | Phone Number |
|---------------------------------------|---------------------|------------|--------------------------|-----------------------|----------------------------|--------------|
| Clerk/Secretary of the Election Board | HEATHER L GILBERT | Republican | PUTNAM COUNTY COURTHOUSE | GREENCASTLE IN 46135 | heather.gilbert@airhop.com | 765-653-2648 |
| Election Board Member | JACK D SUTTON | Republican | 417 E Franklin Apt 5 | Greencastle, IN 46135 | jnottus58@aol.com | 765-720-0967 |
| Election Board Member | JUNE W JAVENS-WOLFE | Democratic | 1001 Crescent Dr | Greencastle, IN 46135 | javenswolfe@gmail.com | 812-606-7045 |
| | | | | | | |
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CEB 9 Summary

Randolph County

REGISTRATION AND TURNOUT:

1. Number of registered voters in **county** for this election (Note: If the election was held only in part of the county, the number of registered voters in that part of the county for this election): **16469**
2. Number of voters voting *in person at the polls on Election Day*: **2777**
3. Number of all voters voting *absentee including by mail, travel board, in-person, and military and overseas (UOCAVA)*: **623**
4. Total number of voters who voted in this election (auto-calculated as #2 + #3): **3400**

ABSENTEE VOTING

5. Please enter the number of absentee ballots that were rejected (exclude UOCAVA): **0**
- 5(a). Please enter the number of absentee ballots Not Received (Not returned to your county by the deadline): **9**

UOCAVA (Voters using the Federal Postcard Application and Federal Write-In Absentee Ballots)

6. The combined total number of absentee ballots sent by county to military and overseas voters: **0**
7. Total number of ballots in #6 returned by these voters. (Include any Federal Write-In Absentee Ballots, counted, because a UOCAVA did not return an official county ballot.): **0**
8. Total number of ballots in #7 counted: **0**

PROVISIONAL BALLOTS:

9. Total number of provisional ballots counted by county election board: **0**
10. Total number of provisional ballots not counted by county election board: **0**
11. The total number of provisional ballots cast by voters in the county in this election (System calculated as #9 + #10): **0**

ELECTION BUDGET AND EQUIPMENT:

12. BUDGETED cost for this election. Estimate if necessary: **33,000**
- 13(a). Provide the following information for the Election System Type:

| Election System Type | System Service Manufacturer | Voting System Model |
|-------------------------------------|-----------------------------|---------------------|
| Direct Recording Electronic Voting | MicroVote | EMS 4.3 |
| Optical Scan Ballot Tabulator | MicroVote | EMS 4.3 |
| ADA Compliant Ballot Marking Device | MicroVote | EMS 4.3 |
| Election Management System | MicroVote | EMS 4.3 |
| Hand Counted Paper Ballot | NO | |

13(b). Name the System Service Manufacturer used by the County in this Election **MicroVote**

13(c). Describe any discrepancies with your voting system during the election if your County:

None

13(d). Name the Election Pollbook system service provider and the system model used by the county in this election:

| System Service Provider | System Model Number(s) |
|-------------------------|------------------------|
| KNOWiNK LLC | PollPad 2.5 |

13(e). Name the EPB System Service Manufacturer used by the County in this Election: **KNOWiNK LLC**

CEB 9 Summary

ENCLOSURES:

14(a). Describe any malfunction or other problem with your voting system during the election. If your county did not experience any problems, please input "None" in the text box below. **None**

14(b). If you will be sending additional information on the malfunctions to IED, how will it be sent? **No Malfunction**

15. How will you be submitting Certified & Final Precinct Level Results for your county to IED? (Please use the Voter Status Counts by Precinct and Split report from SVRS): **Electronic Submission**

16. If you will be sending any additional information to the Election Division, how will it be sent? **Email**

17. Please enter the name, title and mailing address for your county election board members.

| Title | Name | Party Name | Address & Street | City, State, and Zip | E-mail Address | Phone Number |
|---------------------------------------|----------------|------------|---------------------------|----------------------|---------------------------|--------------|
| Clerk/Secretary of the Election Board | MELINDA PEED | Republican | 100 S. MAIN ST., ROOM 201 | WINCHESTER IN 47394 | 68voter01@randolph.in.gov | 7655844214 |
| Election Board Chairman | BEN WELLS | Republican | 100 S. MAIN ST., ROOM 201 | WINCHESTER IN 47394 | 68voter01@randolph.in.gov | 7655844214 |
| Election Board Member | BRIDGET ASHLEY | Democratic | 100 S. MAIN ST., ROOM 201 | WINCHESTER IN 47394 | sward@randolph.in.gov | 7655844214 |
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CEB 9 Summary

Ripley County

REGISTRATION AND TURNOUT:

1. Number of registered voters in **county** for this election (Note: If the election was held only in part of the county, the number of registered voters in that part of the county for this election): **21346**
2. Number of voters voting *in person at the polls on Election Day*: **3658**
3. Number of all voters voting *absentee including by mail, travel board, in-person, and military and overseas (UOCAVA)*: **504**
4. Total number of voters who voted in this election (auto-calculated as #2 + #3): **4162**

ABSENTEE VOTING

5. Please enter the number of absentee ballots that were rejected (exclude UOCAVA): **5**
- 5(a). Please enter the number of absentee ballots Not Received (Not returned to your county by the deadline): **15**

UOCAVA (Voters using the Federal Postcard Application and Federal Write-In Absentee Ballots)

6. The combined total number of absentee ballots sent by county to military and overseas voters: **3**
7. Total number of ballots in #6 returned by these voters. (Include any Federal Write-In Absentee Ballots, counted, because a UOCAVA did not return an official county ballot.): **3**
8. Total number of ballots in #7 counted: **3**

PROVISIONAL BALLOTS:

9. Total number of provisional ballots counted by county election board: **1**
10. Total number of provisional ballots not counted by county election board: **0**
11. The total number of provisional ballots cast by voters in the county in this election (System calculated as #9 + #10): **1**

ELECTION BUDGET AND EQUIPMENT:

12. BUDGETED cost for this election. Estimate if necessary: **72,600.00**
- 13(a). Provide the following information for the Election System Type:

| Election System Type | System Service Manufacturer | Voting System Model |
|-------------------------------------|-----------------------------|---------------------|
| Direct Recording Electronic Voting | Hart InterCivic | HVS 6.2.2 |
| Optical Scan Ballot Tabulator | Hart InterCivic | HVS 6.2.2 |
| ADA Compliant Ballot Marking Device | Hart InterCivic | HVS 6.2.2 |
| Election Management System | Hart InterCivic | HVS 6.2.2 |
| Hand Counted Paper Ballot | NO | |

13(b). Name the System Service Manufacturer used by the County in this Election **Hart InterCivic**

13(c). Describe any discrepancies with your voting system during the election if your County:

None

13(d). Name the Election Pollbook system service provider and the system model used by the county in this election:

| System Service Provider | System Model Number(s) |
|-------------------------|------------------------|
| KNOWiNK LLC | PollPad 2.5 |

13(e). Name the EPB System Service Manufacturer used by the County in this Election: **MicroVote**

CEB 9 Summary

ENCLOSURES:

14(a). Describe any malfunction or other problem with your voting system during the election. If your county did not experience any problems, please input "None" in the text box below. **None**

14(b). If you will be sending additional information on the malfunctions to IED, how will it be sent? **No Malfunction**

15. How will you be submitting Certified & Final Precinct Level Results for your county to IED? (Please use the Voter Status Counts by Precinct and Split report from SVRS): **Electronic Submission**

16. If you will be sending any additional information to the Election Division, how will it be sent? **Email**

17. Please enter the name, title and mailing address for your county election board members.

| Title | Name | Party Name | Address & Street | City, State, and Zip | E-mail Address | Phone Number |
|---------------------------------------|-------------------|------------|---------------------------|----------------------|----------------------------|--------------|
| Clerk/Secretary of the Election Board | GINGER J BRADFORD | Republican | 102 W. FIRST NORTH STREET | VERSAILLES IN 47042 | gbradford@ripleycounty.com | 8126894783 |
| Election Board Chairman | MIKE WEILER | Republican | PO BOX 177 | VERSAILLES IN 47042 | mikeweiler@etczone.com | 8126894783 |
| Election Board Member | EDWARD GINDLING | Democratic | 102 W. FIRST NORTH STREET | VERSAILLES IN 47042 | bgindlin@etczone.com | 8126232972 |
| | | | | | | |
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CEB 9 Summary

Rush County

REGISTRATION AND TURNOUT:

1. Number of registered voters in **county** for this election (Note: If the election was held only in part of the county, the number of registered voters in that part of the county for this election): **11302**
2. Number of voters voting *in person at the polls on Election Day*: **1932**
3. Number of all voters voting *absentee including by mail, travel board, in-person, and military and overseas (UOCAVA)*: **495**
4. Total number of voters who voted in this election (auto-calculated as #2 + #3): **2427**

ABSENTEE VOTING

5. Please enter the number of absentee ballots that were rejected (exclude UOCAVA): **2**
- 5(a). Please enter the number of absentee ballots Not Received (Not returned to your county by the deadline): **2**

UOCAVA (Voters using the Federal Postcard Application and Federal Write-In Absentee Ballots)

6. The combined total number of absentee ballots sent by county to military and overseas voters: **1**
7. Total number of ballots in #6 returned by these voters. (Include any Federal Write-In Absentee Ballots, counted, because a UOCAVA did not return an official county ballot.): **1**
8. Total number of ballots in #7 counted: **1**

PROVISIONAL BALLOTS:

9. Total number of provisional ballots counted by county election board: **0**
10. Total number of provisional ballots not counted by county election board: **0**
11. The total number of provisional ballots cast by voters in the county in this election (System calculated as #9 + #10): **0**

ELECTION BUDGET AND EQUIPMENT:

12. BUDGETED cost for this election. Estimate if necessary: **8,500.00**
- 13(a). Provide the following information for the Election System Type:

| Election System Type | System Service Manufacturer | Voting System Model |
|-------------------------------------|-----------------------------|---------------------|
| Direct Recording Electronic Voting | MicroVote | EMS 4.3 |
| Optical Scan Ballot Tabulator | MicroVote | EMS 4.3 |
| ADA Compliant Ballot Marking Device | N/A | N/A |
| Election Management System | MicroVote | EMS 4.3 |
| Hand Counted Paper Ballot | NO | |

13(b). Name the System Service Manufacturer used by the County in this Election **MicroVote**

13(c). Describe any discrepancies with your voting system during the election if your County:

None

13(d). Name the Election Pollbook system service provider and the system model used by the county in this election:

| System Service Provider | System Model Number(s) |
|-------------------------|------------------------|
| KNOWiNK LLC | PollPad 2.5 |

13(e). Name the EPB System Service Manufacturer used by the County in this Election: **KNOWiNK LLC**

CEB 9 Summary

ENCLOSURES:

14(a). Describe any malfunction or other problem with your voting system during the election. If your county did not experience any problems, please input "None" in the text box below. **None**

14(b). If you will be sending additional information on the malfunctions to IED, how will it be sent? **No Malfunction**

15. How will you be submitting Certified & Final Precinct Level Results for your county to IED? (Please use the Voter Status Counts by Precinct and Split report from SVRS): **Electronic Submission**

16. If you will be sending any additional information to the Election Division, how will it be sent? **Email**

17. Please enter the name, title and mailing address for your county election board members.

| Title | Name | Party Name | Address & Street | City, State, and Zip | E-mail Address | Phone Number |
|---------------------------------------|-------------------|------------|------------------|----------------------|----------------------------|--------------|
| Election Board Chairman | VERLIN CUSTER | Republican | 101 E 2ND ST | RUSHVILLE IN 46173 | vcuster@custerelectric.com | 7657776009 |
| Election Board Member | ROBERT J MCDANIEL | Democrat | 101 E 2ND ST | RUSHVILLE IN 46173 | macdorset@hotmail.com | 3175121145 |
| Clerk/Secretary of the Election Board | ANGELA BUCKLEY | Republican | 101 E 2ND ST | RUSHVILLE IN 46173 | clerk@rushcounty.in.gov | 7659322086 |
| | | | | | | |
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CEB 9 Summary

St. Joseph County

REGISTRATION AND TURNOUT:

1. Number of registered voters in **county** for this election (Note: If the election was held only in part of the county, the number of registered voters in that part of the county for this election): **194269**
2. Number of voters voting *in person at the polls on Election Day*: **11512**
3. Number of all voters voting *absentee including by mail, travel board, in-person, and military and overseas (UOCAVA)*: **2952**
4. Total number of voters who voted in this election (auto-calculated as #2 + #3): **14464**

ABSENTEE VOTING

5. Please enter the number of absentee ballots that were rejected (exclude UOCAVA): **37**
- 5(a). Please enter the number of absentee ballots Not Received (Not returned to your county by the deadline): **248**

UOCAVA (Voters using the Federal Postcard Application and Federal Write-In Absentee Ballots)

6. The combined total number of absentee ballots sent by county to military and overseas voters: **27**
7. Total number of ballots in #6 returned by these voters. (Include any Federal Write-In Absentee Ballots, counted, because a UOCAVA did not return an official county ballot.): **20**
8. Total number of ballots in #7 counted: **19**

PROVISIONAL BALLOTS:

9. Total number of provisional ballots counted by county election board: **20**
10. Total number of provisional ballots not counted by county election board: **8**
11. The total number of provisional ballots cast by voters in the county in this election (System calculated as #9 + #10): **28**

ELECTION BUDGET AND EQUIPMENT:

12. BUDGETED cost for this election. Estimate if necessary: **634,815.00**
- 13(a). Provide the following information for the Election System Type:

| Election System Type | System Service Manufacturer | Voting System Model |
|-------------------------------------|-----------------------------|---------------------|
| Direct Recording Electronic Voting | N/A | N/A |
| Optical Scan Ballot Tabulator | Unisyn | OpenElect 2.1 |
| ADA Compliant Ballot Marking Device | Unisyn | OpenElect 2.1 |
| Election Management System | Unisyn | OpenElect 2.1 |
| Hand Counted Paper Ballot | NO | |

- 13(b). Name the System Service Manufacturer used by the County in this Election **RBM**

- 13(c). Describe any discrepancies with your voting system during the election if your County:

None

- 13(d). Name the Election Pollbook system service provider and the system model used by the county in this election:

| System Service Provider | System Model Number(s) |
|-------------------------|------------------------|
| KNOWiNK LLC | PollPad 2.5 |

- 13(e). Name the EPB System Service Manufacturer used by the County in this Election: **MicroVote**

CEB 9 Summary

ENCLOSURES:

14(a). Describe any malfunction or other problem with your voting system during the election. If your county did not experience any problems, please input "None" in the text box below. **None**

14(b). If you will be sending additional information on the malfunctions to IED, how will it be sent? **No Malfunction**

15. How will you be submitting Certified & Final Precinct Level Results for your county to IED? (Please use the Voter Status Counts by Precinct and Split report from SVRS): **Email**

16. If you will be sending any additional information to the Election Division, how will it be sent? **Email**

17. Please enter the name, title and mailing address for your county election board members.

| Title | Name | Party Name | Address & Street | City, State, and Zip | E-mail Address | Phone Number |
|---------------------------------------|----------------------|------------|-------------------|--------------------------|------------------------|--------------|
| Clerk/Secretary of the Election Board | RITA L GLENN | Democratic | 101 S MAIN STREET | SOUTH BEND IN 46601-1871 | rglenn@sjcindiana | 574-235-5054 |
| Election Board Chairman | M. CATHERINE FANELLO | Democratic | 101 S MAIN STREET | SOUTH BEND IN 46601-1871 | rglenn@sjcindiana | 574-235-5054 |
| Election Board Member | BENJAMIN D HORVATH | Republican | 101 S MAIN STREET | SOUTH BEND IN 46601-1871 | rglenn@sjcinindana.com | 574-235-5054 |
| | | | | | | |
| | | | | | | |

CEB 9 Summary

Scott County

REGISTRATION AND TURNOUT:

1. Number of registered voters in **county** for this election (Note: If the election was held only in part of the county, the number of registered voters in that part of the county for this election): **16927**
2. Number of voters voting *in person at the polls on Election Day*: **1815**
3. Number of all voters voting *absentee including by mail, travel board, in-person, and military and overseas (UOCAVA)*: **524**
4. Total number of voters who voted in this election (auto-calculated as #2 + #3): **2339**

ABSENTEE VOTING

5. Please enter the number of absentee ballots that were rejected (exclude UOCAVA): **0**
- 5(a). Please enter the number of absentee ballots Not Received (Not returned to your county by the deadline): **47**

UOCAVA (Voters using the Federal Postcard Application and Federal Write-In Absentee Ballots)

6. The combined total number of absentee ballots sent by county to military and overseas voters: **1**
7. Total number of ballots in #6 returned by these voters. (Include any Federal Write-In Absentee Ballots, counted, because a UOCAVA did not return an official county ballot.): **1**
8. Total number of ballots in #7 counted: **1**

PROVISIONAL BALLOTS:

9. Total number of provisional ballots counted by county election board: **0**
10. Total number of provisional ballots not counted by county election board: **0**
11. The total number of provisional ballots cast by voters in the county in this election (System calculated as #9 + #10): **0**

ELECTION BUDGET AND EQUIPMENT:

12. BUDGETED cost for this election. Estimate if necessary: **525,111.00**
- 13(a). Provide the following information for the Election System Type:

| Election System Type | System Service Manufacturer | Voting System Model |
|-------------------------------------|-----------------------------|---------------------|
| Direct Recording Electronic Voting | MicroVote | EMS 4.1 |
| Optical Scan Ballot Tabulator | MicroVote | EMS 4.1 |
| ADA Compliant Ballot Marking Device | MicroVote | EMS 4.1 |
| Election Management System | MicroVote | EMS 4.1 |
| Hand Counted Paper Ballot | NO | |

- 13(b). Name the System Service Manufacturer used by the County in this Election **MicroVote**

- 13(c). Describe any discrepancies with your voting system during the election if your County:
None

- 13(d). Name the Election Pollbook system service provider and the system model used by the county in this election:

| System Service Provider | System Model Number(s) |
|-------------------------|------------------------|
| KNOWiNK LLC | PollPad 2.5 |

- 13(e). Name the EPB System Service Manufacturer used by the County in this Election: **KNOWiNK LLC**

CEB 9 Summary

ENCLOSURES:

14(a). Describe any malfunction or other problem with your voting system during the election. If your county did not experience any problems, please input "None" in the text box below. **None**

14(b). If you will be sending additional information on the malfunctions to IED, how will it be sent? **No Malfunction**

15. How will you be submitting Certified & Final Precinct Level Results for your county to IED? (Please use the Voter Status Counts by Precinct and Split report from SVRS): **Electronic Submission**

16. If you will be sending any additional information to the Election Division, how will it be sent? **Email**

17. Please enter the name, title and mailing address for your county election board members.

| Title | Name | Party Name | Address & Street | City, State, and Zip | E-mail Address | Phone Number |
|---------------------------------------|-------------------------|------------|--------------------|----------------------|-------------------------------------|--------------|
| Clerk/Secretary of the Election Board | LINNIE MICHELLE SHELTON | Republic | 1 E MCCLAIN AVENUE | SCOTTSBURG IN 47170 | michelle.shelton@scottcounty.in.gov | 8127528420 |
| Election Board Chairman | JOSH STIGDON | Democratic | 1 E MCCLAIN AVENUE | SCOTTSBURG IN 47170 | jstigdon@gmail.com | 8127223195 |
| Election Board Member | DALE MARTIN | Republican | 1 E MCCLAIN AVENUE | SCOTTSBURG IN 47170 | regionabedale@gmail.com | 8125951675 |
| | | | | | | |
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CEB 9 Summary

Shelby County

REGISTRATION AND TURNOUT:

1. Number of registered voters in **county** for this election (Note: If the election was held only in part of the county, the number of registered voters in that part of the county for this election): **30816**
2. Number of voters voting *in person at the polls on Election Day*: **4207**
3. Number of all voters voting *absentee including by mail, travel board, in-person, and military and overseas (UOCAVA)*: **1328**
4. Total number of voters who voted in this election (auto-calculated as #2 + #3): **5535**

ABSENTEE VOTING

5. Please enter the number of absentee ballots that were rejected (exclude UOCAVA): **0**
- 5(a). Please enter the number of absentee ballots Not Received (Not returned to your county by the deadline): **19**

UOCAVA (Voters using the Federal Postcard Application and Federal Write-In Absentee Ballots)

6. The combined total number of absentee ballots sent by county to military and overseas voters: **3**
7. Total number of ballots in #6 returned by these voters. (Include any Federal Write-In Absentee Ballots, counted, because a UOCAVA did not return an official county ballot.): **3**
8. Total number of ballots in #7 counted: **3**

PROVISIONAL BALLOTS:

9. Total number of provisional ballots counted by county election board: **0**
10. Total number of provisional ballots not counted by county election board: **0**
11. The total number of provisional ballots cast by voters in the county in this election (System calculated as #9 + #10): **0**

ELECTION BUDGET AND EQUIPMENT:

12. BUDGETED cost for this election. Estimate if necessary: **70,000**
- 13(a). Provide the following information for the Election System Type:

| Election System Type | System Service Manufacturer | Voting System Model |
|-------------------------------------|-----------------------------|---------------------|
| Direct Recording Electronic Voting | MicroVote | EMS 4.4 |
| Optical Scan Ballot Tabulator | MicroVote | EMS 4.4 |
| ADA Compliant Ballot Marking Device | MicroVote | EMS 4.4 |
| Election Management System | MicroVote | EMS 4.4 |
| Hand Counted Paper Ballot | NO | |

- 13(b). Name the System Service Manufacturer used by the County in this Election **MicroVote**

- 13(c). Describe any discrepancies with your voting system during the election if your County:
None

- 13(d). Name the Election Pollbook system service provider and the system model used by the county in this election:

| System Service Provider | System Model Number(s) |
|-------------------------|------------------------|
| KNOWiNK LLC | PollPad 3.0 |

- 13(e). Name the EPB System Service Manufacturer used by the County in this Election: **KNOWiNK LLC**

CEB 9 Summary

ENCLOSURES:

14(a). Describe any malfunction or other problem with your voting system during the election. If your county did not experience any problems, please input "None" in the text box below. **None**

14(b). If you will be sending additional information on the malfunctions to IED, how will it be sent? **No Malfunction**

15. How will you be submitting Certified & Final Precinct Level Results for your county to IED? (Please use the Voter Status Counts by Precinct and Split report from SVRS): **Electronic Submission**

16. If you will be sending any additional information to the Election Division, how will it be sent? **Email**

17. Please enter the name, title and mailing address for your county election board members.

| Title | Name | Party Name | Address & Street | City, State, and Zip | E-mail Address | Phone Number |
|---------------------------------------|-------------|------------|------------------|---------------------------|-------------------------|--------------|
| Clerk/Secretary of the Election Board | JILL TAYLOR | Republican | PO BOX 198 | SHELBYVILLE IN 46176-0198 | jtaylor@co.shelby.in.us | 3174218014 |
| Election Board Member | TERRI MEAL | Democrat | PO BOX 198 | SHELBYVILLE IN 46176-0198 | tmeal24@aol.com | 3174218014 |
| Election Board Member | ANDY EADS | Republican | PO BOX 198 | SHELBYVILLE IN 46176-0198 | andyeads@shelbylaw.com | 3174218014 |
| | | | | | | |
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CEB 9 Summary

Spencer County

REGISTRATION AND TURNOUT:

1. Number of registered voters in **county** for this election (Note: If the election was held only in part of the county, the number of registered voters in that part of the county for this election): **14953**
2. Number of voters voting *in person at the polls on Election Day*: **806**
3. Number of all voters voting *absentee including by mail, travel board, in-person, and military and overseas (UOCAVA)*: **424**
4. Total number of voters who voted in this election (auto-calculated as #2 + #3): **1230**

ABSENTEE VOTING

5. Please enter the number of absentee ballots that were rejected (exclude UOCAVA): **3**
- 5(a). Please enter the number of absentee ballots Not Received (Not returned to your county by the deadline): **6**

UOCAVA (Voters using the Federal Postcard Application and Federal Write-In Absentee Ballots)

6. The combined total number of absentee ballots sent by county to military and overseas voters: **2**
7. Total number of ballots in #6 returned by these voters. (Include any Federal Write-In Absentee Ballots, counted, because a UOCAVA did not return an official county ballot.): **2**
8. Total number of ballots in #7 counted: **2**

PROVISIONAL BALLOTS:

9. Total number of provisional ballots counted by county election board: **10**
10. Total number of provisional ballots not counted by county election board: **0**
11. The total number of provisional ballots cast by voters in the county in this election (System calculated as #9 + #10): **10**

ELECTION BUDGET AND EQUIPMENT:

12. BUDGETED cost for this election. Estimate if necessary: **19,908.00**
- 13(a). Provide the following information for the Election System Type:

| Election System Type | System Service Manufacturer | Voting System Model |
|-------------------------------------|-----------------------------|---------------------|
| Direct Recording Electronic Voting | MicroVote | EMS 4.4 |
| Optical Scan Ballot Tabulator | MicroVote | EMS 4.4 |
| ADA Compliant Ballot Marking Device | MicroVote | EMS 4.4 |
| Election Management System | MicroVote | EMS 4.4 |
| Hand Counted Paper Ballot | NO | |

- 13(b). Name the System Service Manufacturer used by the County in this Election **MicroVote**

- 13(c). Describe any discrepancies with your voting system during the election if your County:

NONE

- 13(d). Name the Election Pollbook system service provider and the system model used by the county in this election:

| System Service Provider | System Model Number(s) |
|-------------------------|------------------------|
| KNOWiNK LLC | PollPad 3.0 |

- 13(e). Name the EPB System Service Manufacturer used by the County in this Election: **KNOWiNK LLC**

CEB 9 Summary

ENCLOSURES:

14(a). Describe any malfunction or other problem with your voting system during the election. If your county did not experience any problems, please input "None" in the text box below. **NONE**

14(b). If you will be sending additional information on the malfunctions to IED, how will it be sent? **No Malfunction**

15. How will you be submitting Certified & Final Precinct Level Results for your county to IED? (Please use the Voter Status Counts by Precinct and Split report from SVRS): **Electronic Submission**

16. If you will be sending any additional information to the Election Division, how will it be sent? **Email**

17. Please enter the name, title and mailing address for your county election board members.

| Title | Name | Party Name | Address & Street | City, State, and Zip | E-mail Address | Phone Number |
|---------------------------------------|------------------|------------|------------------|----------------------|------------------------------|--------------|
| Election Board Chairman | GINA PENNINGTON | Democratic | 200 MAIN STREET | ROCKPORT IN 47635- | ginappenington@yahoo.com | 8126863656 |
| Election Board Member | JEFF LINDSEY | Republican | 200 MAIN STREET | ROCKPORT IN 47635- | lindsay217main@sbcglobal.net | 8126496017 |
| Clerk/Secretary of the Election Board | DARRELL STEPHENS | REPUBLICAN | 200 MAIN ST | ROCKPORT IN 47635 | spcoelections@psci.net | 8125496029 |
| | | | | | | |
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CEB 9 Summary

Starke County

REGISTRATION AND TURNOUT:

1. Number of registered voters in **county** for this election (Note: If the election was held only in part of the county, the number of registered voters in that part of the county for this election): **17506**
2. Number of voters voting *in person at the polls on Election Day*: **2628**
3. Number of all voters voting *absentee including by mail, travel board, in-person, and military and overseas (UOCAVA)*: **760**
4. Total number of voters who voted in this election (auto-calculated as #2 + #3): **3388**

ABSENTEE VOTING

5. Please enter the number of absentee ballots that were rejected (exclude UOCAVA): **1**
- 5(a). Please enter the number of absentee ballots Not Received (Not returned to your county by the deadline): **7**

UOCAVA (Voters using the Federal Postcard Application and Federal Write-In Absentee Ballots)

6. The combined total number of absentee ballots sent by county to military and overseas voters: **0**
7. Total number of ballots in #6 returned by these voters. (Include any Federal Write-In Absentee Ballots, counted, because a UOCAVA did not return an official county ballot.): **0**
8. Total number of ballots in #7 counted: **0**

PROVISIONAL BALLOTS:

9. Total number of provisional ballots counted by county election board: **8**
10. Total number of provisional ballots not counted by county election board: **0**
11. The total number of provisional ballots cast by voters in the county in this election (System calculated as #9 + #10): **8**

ELECTION BUDGET AND EQUIPMENT:

12. BUDGETED cost for this election. Estimate if necessary: **98,000.00**
- 13(a). Provide the following information for the Election System Type:

| Election System Type | System Service Manufacturer | Voting System Model |
|-------------------------------------|-----------------------------|---------------------|
| Direct Recording Electronic Voting | MicroVote | EMS 4.4 |
| Optical Scan Ballot Tabulator | MicroVote | EMS 4.4 |
| ADA Compliant Ballot Marking Device | MicroVote | EMS 4.4 |
| Election Management System | MicroVote | EMS 4.4 |
| Hand Counted Paper Ballot | NO | |

- 13(b). Name the System Service Manufacturer used by the County in this Election **MicroVote**

- 13(c). Describe any discrepancies with your voting system during the election if your County:

NONE

- 13(d). Name the Election Pollbook system service provider and the system model used by the county in this election:

| System Service Provider | System Model Number(s) |
|-------------------------|------------------------|
| KNOWiNK LLC | PollPad 2.5.2 |

- 13(e). Name the EPB System Service Manufacturer used by the County in this Election: **KNOWiNK LLC**

CEB 9 Summary

ENCLOSURES:

14(a). Describe any malfunction or other problem with your voting system during the election. If your county did not experience any problems, please input "None" in the text box below. **NONE**

14(b). If you will be sending additional information on the malfunctions to IED, how will it be sent? **No Malfunction**

15. How will you be submitting Certified & Final Precinct Level Results for your county to IED? (Please use the Voter Status Counts by Precinct and Split report from SVRS): **Email**

16. If you will be sending any additional information to the Election Division, how will it be sent? **Email**

17. Please enter the name, title and mailing address for your county election board members.

| Title | Name | Party Name | Address & Street | City, State, and Zip | E-mail Address | Phone Number |
|---------------------------------------|-------------------|------------|------------------|----------------------|---------------------------|--------------|
| Clerk/Secretary of the Election Board | BERNADETTE MANUEL | REPUBLICAN | PO BOX 395 | KNOX IN 46534 | BMANUEL@CO.STARKE.IN.US | 5747729128 |
| Election Board Chairman | MARCIA BEDROCK | REPUBLICAN | PO BOX 395 | KNOX IN 46534 | elections@co.starke.in.us | 5747729128 |
| Election Board Member | JEFF HOUSTON | Democratic | PO BOX 395 | KNOX IN 46534 | elections@co.starke.in.us | 5747729128 |
| | | | | | | |
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CEB 9 Summary

Steuben County

REGISTRATION AND TURNOUT:

1. Number of registered voters in **county** for this election (Note: If the election was held only in part of the county, the number of registered voters in that part of the county for this election): **25531**
2. Number of voters voting *in person at the polls on Election Day*: **3355**
3. Number of all voters voting *absentee including by mail, travel board, in-person, and military and overseas (UOCAVA)*: **736**
4. Total number of voters who voted in this election (auto-calculated as #2 + #3): **4091**

ABSENTEE VOTING

5. Please enter the number of absentee ballots that were rejected (exclude UOCAVA): **0**
- 5(a). Please enter the number of absentee ballots Not Received (Not returned to your county by the deadline): **25**

UOCAVA (Voters using the Federal Postcard Application and Federal Write-In Absentee Ballots)

6. The combined total number of absentee ballots sent by county to military and overseas voters: **0**
7. Total number of ballots in #6 returned by these voters. (Include any Federal Write-In Absentee Ballots, counted, because a UOCAVA did not return an official county ballot.): **0**
8. Total number of ballots in #7 counted: **0**

PROVISIONAL BALLOTS:

9. Total number of provisional ballots counted by county election board: **2**
10. Total number of provisional ballots not counted by county election board: **0**
11. The total number of provisional ballots cast by voters in the county in this election (System calculated as #9 + #10): **2**

ELECTION BUDGET AND EQUIPMENT:

12. BUDGETED cost for this election. Estimate if necessary: **12,000**
- 13(a). Provide the following information for the Election System Type:

| Election System Type | System Service Manufacturer | Voting System Model |
|-------------------------------------|-----------------------------|---------------------|
| Direct Recording Electronic Voting | MicroVote | EMS 4.4 |
| Optical Scan Ballot Tabulator | MicroVote | EMS 4.4 |
| ADA Compliant Ballot Marking Device | MicroVote | EMS 4.4 |
| Election Management System | MicroVote | EMS 4.4 |
| Hand Counted Paper Ballot | NO | |

13(b). Name the System Service Manufacturer used by the County in this Election **MicroVote**

13(c). Describe any discrepancies with your voting system during the election if your County:
none

13(d). Name the Election Pollbook system service provider and the system model used by the county in this election:

| System Service Provider | System Model Number(s) |
|-------------------------|------------------------|
| KNOWiNK LLC | PollPad 2.3.7 |

13(e). Name the EPB System Service Manufacturer used by the County in this Election: **KNOWiNK LLC**

CEB 9 Summary

ENCLOSURES:

14(a). Describe any malfunction or other problem with your voting system during the election. If your county did not experience any problems, please input "None" in the text box below. **none**

14(b). If you will be sending additional information on the malfunctions to IED, how will it be sent? **No Malfunction**

15. How will you be submitting Certified & Final Precinct Level Results for your county to IED? (Please use the Voter Status Counts by Precinct and Split report from SVRS): **Electronic Submission**

16. If you will be sending any additional information to the Election Division, how will it be sent? **Email**

17. Please enter the name, title and mailing address for your county election board members.

| Title | Name | Party Name | Address & Street | City, State, and Zip | E-mail Address | Phone Number |
|---------------------------------------|---------------|------------|--------------------|----------------------|---------------------------|-----------------|
| Clerk/Secretary of the Election Board | TANGI MANAHAN | Republican | 55 S PUBLIC SQUARE | ANGOLA IN 46703 | tmanahan@co.steuben.in.us | 2606681000x2230 |
| Election Board Chairman | KIM SHOUP | Republican | 55 S PUBLIC SQUARE | ANGOLA IN 46703 | tmanahan@co.steuben.in.us | 2606681000x2230 |
| Election Board Member | BRANT MOORE | Democratic | 55 S PUBLIC SQUARE | ANGOLA IN 46703 | tmanahan@co.steuben.in.us | 2606681000x2230 |
| | | | | | | |
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CEB 9 Summary

Sullivan County

REGISTRATION AND TURNOUT:

1. Number of registered voters in **county** for this election (Note: If the election was held only in part of the county, the number of registered voters in that part of the county for this election): **14195**
2. Number of voters voting *in person at the polls on Election Day*: **2963**
3. Number of all voters voting *absentee including by mail, travel board, in-person, and military and overseas (UOCAVA)*: **774**
4. Total number of voters who voted in this election (auto-calculated as #2 + #3): **3737**

ABSENTEE VOTING

5. Please enter the number of absentee ballots that were rejected (exclude UOCAVA): **0**
- 5(a). Please enter the number of absentee ballots Not Received (Not returned to your county by the deadline): **8**

UOCAVA (Voters using the Federal Postcard Application and Federal Write-In Absentee Ballots)

6. The combined total number of absentee ballots sent by county to military and overseas voters: **2**
7. Total number of ballots in #6 returned by these voters. (Include any Federal Write-In Absentee Ballots, counted, because a UOCAVA did not return an official county ballot.): **2**
8. Total number of ballots in #7 counted: **2**

PROVISIONAL BALLOTS:

9. Total number of provisional ballots counted by county election board: **1**
10. Total number of provisional ballots not counted by county election board: **1**
11. The total number of provisional ballots cast by voters in the county in this election (System calculated as #9 + #10): **2**

ELECTION BUDGET AND EQUIPMENT:

12. BUDGETED cost for this election. Estimate if necessary: **30,000**
- 13(a). Provide the following information for the Election System Type:

| Election System Type | System Service Manufacturer | Voting System Model |
|-------------------------------------|-----------------------------|---------------------|
| Direct Recording Electronic Voting | MicroVote | EMS 4.4 |
| Optical Scan Ballot Tabulator | MicroVote | EMS 4.4 |
| ADA Compliant Ballot Marking Device | MicroVote | EMS 4.4 |
| Election Management System | MicroVote | EMS 4.4 |
| Hand Counted Paper Ballot | NO | |

- 13(b). Name the System Service Manufacturer used by the County in this Election **MicroVote**

- 13(c). Describe any discrepancies with your voting system during the election if your County:

None

- 13(d). Name the Election Pollbook system service provider and the system model used by the county in this election:

| System Service Provider | System Model Number(s) |
|-------------------------|------------------------|
| KNOWiNK LLC | PollPad 3.0.1 |

- 13(e). Name the EPB System Service Manufacturer used by the County in this Election: **KNOWiNK LLC**

CEB 9 Summary

ENCLOSURES:

14(a). Describe any malfunction or other problem with your voting system during the election. If your county did not experience any problems, please input "None" in the text box below. **None**

14(b). If you will be sending additional information on the malfunctions to IED, how will it be sent? **USPS or Courier**

15. How will you be submitting Certified & Final Precinct Level Results for your county to IED? (Please use the Voter Status Counts by Precinct and Split report from SVRS): **USPS or Courier**

16. If you will be sending any additional information to the Election Division, how will it be sent? **USPS or Courier**

17. Please enter the name, title and mailing address for your county election board members.

| Title | Name | Party Name | Address & Street | City, State, and Zip | E-mail Address | Phone Number |
|---------------------------------------|------------------|------------|------------------|----------------------|--------------------------------|--------------|
| Clerk/Secretary of the Election Board | TONYA J. BEDWELL | Republican | PO BOX 370 | SULLIVAN IN 47882 | tbedwell@sullivancounty.in.gov | 8122684657 |
| Election Board Chairman | DOUG FOLLOWELL | Democrat | PO BOX 370 | SULLIVAN IN 47882 | followelllaw@joink.com | 1822683415 |
| Election Board Member | BILL SPRINGER | Republican | PO BOX 370 | SULLIVAN IN 47882 | tbedwell@sullivancounty.in.gov | 8122684657 |
| | | | | | | |
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CEB 9 Summary

Switzerland County

REGISTRATION AND TURNOUT:

1. Number of registered voters in **county** for this election (Note: If the election was held only in part of the county, the number of registered voters in that part of the county for this election): **7059**
2. Number of voters voting *in person at the polls on Election Day*: **432**
3. Number of all voters voting *absentee including by mail, travel board, in-person, and military and overseas (UOCAVA)*: **719**
4. Total number of voters who voted in this election (auto-calculated as #2 + #3): **1151**

ABSENTEE VOTING

5. Please enter the number of absentee ballots that were rejected (exclude UOCAVA): **0**
- 5(a). Please enter the number of absentee ballots Not Received (Not returned to your county by the deadline): **0**

UOCAVA (Voters using the Federal Postcard Application and Federal Write-In Absentee Ballots)

6. The combined total number of absentee ballots sent by county to military and overseas voters: **1**
7. Total number of ballots in #6 returned by these voters. (Include any Federal Write-In Absentee Ballots, counted, because a UOCAVA did not return an official county ballot.): **1**
8. Total number of ballots in #7 counted: **1**

PROVISIONAL BALLOTS:

9. Total number of provisional ballots counted by county election board: **0**
10. Total number of provisional ballots not counted by county election board: **0**
11. The total number of provisional ballots cast by voters in the county in this election (System calculated as #9 + #10): **0**

ELECTION BUDGET AND EQUIPMENT:

12. BUDGETED cost for this election. Estimate if necessary: **23,640.00**
- 13(a). Provide the following information for the Election System Type:

| Election System Type | System Service Manufacturer | Voting System Model |
|-------------------------------------|-----------------------------|---------------------|
| Direct Recording Electronic Voting | Hart InterCivic | Verity 2.5 |
| Optical Scan Ballot Tabulator | Hart InterCivic | Verity 2.5 |
| ADA Compliant Ballot Marking Device | Hart InterCivic | Verity 2.5 |
| Election Management System | Hart InterCivic | Verity 2.5 |
| Hand Counted Paper Ballot | NO | |

- 13(b). Name the System Service Manufacturer used by the County in this Election **Hart InterCivic**

- 13(c). Describe any discrepancies with your voting system during the election if your County:
none

- 13(d). Name the Election Pollbook system service provider and the system model used by the county in this election:

| System Service Provider | System Model Number(s) |
|-------------------------|------------------------|
| KNOWiNK LLC | PollPad 2.5 |

- 13(e). Name the EPB System Service Manufacturer used by the County in this Election: **KNOWiNK LLC**

CEB 9 Summary

ENCLOSURES:

14(a). Describe any malfunction or other problem with your voting system during the election. If your county did not experience any problems, please input "None" in the text box below. **none**

14(b). If you will be sending additional information on the malfunctions to IED, how will it be sent? **No Malfunction**

15. How will you be submitting Certified & Final Precinct Level Results for your county to IED? (Please use the Voter Status Counts by Precinct and Split report from SVRS): **Electronic Submission**

16. If you will be sending any additional information to the Election Division, how will it be sent? **Electronic Submission**

17. Please enter the name, title and mailing address for your county election board members.

| Title | Name | Party Name | Address & Street | City, State, and Zip | E-mail Address | Phone Number |
|---------------------------------------|----------------|------------|-------------------|----------------------|---------------------------------------|--------------|
| Election Board Chairman | ANGEL LIELAND | Republican | 212 W MAIN STREET | VEVAY IN 47043 | clerk@switzerland.in.gov | 8124274415 |
| Election Board Member | TOM CONROY | Democratic | 212 W MAIN STREET | VEVAY IN 47043 | clerk@switzerlandcountycourthouse.org | 8124274415 |
| Clerk/Secretary of the Election Board | GAYLE SULLIVAN | Republican | 212 W MAIN STREET | VEVAY IN 47043 | clerk@switzerlandcountycourthouse.org | 8124274415 |
| | | | | | | |
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CEB 9 Summary

Tippecanoe County

REGISTRATION AND TURNOUT:

1. Number of registered voters in **county** for this election (Note: If the election was held only in part of the county, the number of registered voters in that part of the county for this election): **122300**
2. Number of voters voting *in person at the polls on Election Day*: **6489**
3. Number of all voters voting *absentee including by mail, travel board, in-person, and military and overseas (UOCAVA)*: **2776**
4. Total number of voters who voted in this election (auto-calculated as #2 + #3): **9265**

ABSENTEE VOTING

5. Please enter the number of absentee ballots that were rejected (exclude UOCAVA): **31**
- 5(a). Please enter the number of absentee ballots Not Received (Not returned to your county by the deadline): **29**

UOCAVA (Voters using the Federal Postcard Application and Federal Write-In Absentee Ballots)

6. The combined total number of absentee ballots sent by county to military and overseas voters: **15**
7. Total number of ballots in #6 returned by these voters. (Include any Federal Write-In Absentee Ballots, counted, because a UOCAVA did not return an official county ballot.): **11**
8. Total number of ballots in #7 counted: **11**

PROVISIONAL BALLOTS:

9. Total number of provisional ballots counted by county election board: **1**
10. Total number of provisional ballots not counted by county election board: **3**
11. The total number of provisional ballots cast by voters in the county in this election (System calculated as #9 + #10): **4**

ELECTION BUDGET AND EQUIPMENT:

12. BUDGETED cost for this election. Estimate if necessary: **82,155**
- 13(a). Provide the following information for the Election System Type:

| Election System Type | System Service Manufacturer | Voting System Model |
|-------------------------------------|-----------------------------|---------------------|
| Direct Recording Electronic Voting | MicroVote | EMS 4.4 |
| Optical Scan Ballot Tabulator | MicroVote | EMS 4.4 |
| ADA Compliant Ballot Marking Device | MicroVote | EMS 4.4 |
| Election Management System | MicroVote | EMS 4.4 |
| Hand Counted Paper Ballot | NO | |

13(b). Name the System Service Manufacturer used by the County in this Election **MicroVote**

13(c). Describe any discrepancies with your voting system during the election if your County:

None

13(d). Name the Election Pollbook system service provider and the system model used by the county in this election:

| System Service Provider | System Model Number(s) |
|-------------------------|------------------------|
| KNOWiNK LLC | PollPad 3.0.1 |

13(e). Name the EPB System Service Manufacturer used by the County in this Election: **KNOWiNK LLC**

CEB 9 Summary

ENCLOSURES:

14(a). Describe any malfunction or other problem with your voting system during the election. If your county did not experience any problems, please input "None" in the text box below. **None**

14(b). If you will be sending additional information on the malfunctions to IED, how will it be sent? **No Malfunction**

15. How will you be submitting Certified & Final Precinct Level Results for your county to IED? (Please use the Voter Status Counts by Precinct and Split report from SVRS): **Electronic Submission**

16. If you will be sending any additional information to the Election Division, how will it be sent? **Electronic Submission**

17. Please enter the name, title and mailing address for your county election board members.

| Title | Name | Party Name | Address & Street | City, State, and Zip | E-mail Address | Phone Number |
|---------------------------------------|-------------------|------------|------------------|----------------------|------------------------------|--------------|
| Clerk/Secretary of the Election Board | JULIE A ROUSH | Republican | 20 N 3RD ST | LAFAYETTE IN 47901 | jroush@tippecanoe.in.gov | 765-423-9724 |
| Election Board Chairman | RANDY VONDERHEIDE | Republican | 20 N 3RD ST | LAFAYETTE IN 47901 | rvonde@vonderheideknecht.com | 765-423-2557 |
| Election Board Member | KENT MOORE | Democratic | 20 N 3RD ST | LAFAYETTE IN 47901 | ekentmoore624@icloud.com | 765-426-5269 |
| | | | | | | |
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CEB 9 Summary

Tipton County

REGISTRATION AND TURNOUT:

1. Number of registered voters in **county** for this election (Note: If the election was held only in part of the county, the number of registered voters in that part of the county for this election): **11724**
2. Number of voters voting *in person at the polls on Election Day*: **2166**
3. Number of all voters voting *absentee including by mail, travel board, in-person, and military and overseas (UOCAVA)*: **579**
4. Total number of voters who voted in this election (auto-calculated as #2 + #3): **2745**

ABSENTEE VOTING

5. Please enter the number of absentee ballots that were rejected (exclude UOCAVA): **4**
- 5(a). Please enter the number of absentee ballots Not Received (Not returned to your county by the deadline): **10**

UOCAVA (Voters using the Federal Postcard Application and Federal Write-In Absentee Ballots)

6. The combined total number of absentee ballots sent by county to military and overseas voters: **1**
7. Total number of ballots in #6 returned by these voters. (Include any Federal Write-In Absentee Ballots, counted, because a UOCAVA did not return an official county ballot.): **1**
8. Total number of ballots in #7 counted: **1**

PROVISIONAL BALLOTS:

9. Total number of provisional ballots counted by county election board: **1**
10. Total number of provisional ballots not counted by county election board: **0**
11. The total number of provisional ballots cast by voters in the county in this election (System calculated as #9 + #10): **1**

ELECTION BUDGET AND EQUIPMENT:

12. BUDGETED cost for this election. Estimate if necessary: **49,195.00**
- 13(a). Provide the following information for the Election System Type:

| Election System Type | System Service Manufacturer | Voting System Model |
|-------------------------------------|-----------------------------|---------------------|
| Direct Recording Electronic Voting | MicroVote | EMS 4.3 |
| Optical Scan Ballot Tabulator | N/A | N/A |
| ADA Compliant Ballot Marking Device | MicroVote | EMS 4.3 |
| Election Management System | MicroVote | EMS 4.3 |
| Hand Counted Paper Ballot | YES | |

13(b). Name the System Service Manufacturer used by the County in this Election **MicroVote**

13(c). Describe any discrepancies with your voting system during the election if your County:

None

13(d). Name the Election Pollbook system service provider and the system model used by the county in this election:

| System Service Provider | System Model Number(s) |
|-------------------------|------------------------|
| KNOWiNK LLC | PollPad 3.0.1 |

13(e). Name the EPB System Service Manufacturer used by the County in this Election: **KNOWiNK LLC**

CEB 9 Summary

ENCLOSURES:

14(a). Describe any malfunction or other problem with your voting system during the election. If your county did not experience any problems, please input "None" in the text box below. **None**

14(b). If you will be sending additional information on the malfunctions to IED, how will it be sent? **No Malfunction**

15. How will you be submitting Certified & Final Precinct Level Results for your county to IED? (Please use the Voter Status Counts by Precinct and Split report from SVRS): **Electronic Submission**

16. If you will be sending any additional information to the Election Division, how will it be sent? **Email**

17. Please enter the name, title and mailing address for your county election board members.

| Title | Name | Party Name | Address & Street | City, State, and Zip | E-mail Address | Phone Number |
|---------------------------------------|----------------------|------------|------------------------|----------------------|-------------------------------|--------------|
| Clerk/Secretary of the Election Board | CHRISTINE L CRAWFORD | Republican | 101 E JEFFERSON STREET | TIPTON IN 46072 | ccrawford@tiptoncounty.in.gov | 7656752795 |
| Election Board Chairman | MARK REGNIER | Republican | 101 E JEFFERSON STREET | TIPTON IN 46072 | ccrawford@tiptoncounty.in.gov | 7656752795 |
| Election Board Member | RAY NOBLE | Democrat | 101 E JEFFERSON STREET | TIPTON IN 46072 | ccrawford@tiptoncounty.in.gov | 7656752795 |
| | | | | | | |
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CEB 9 Summary

Union County

REGISTRATION AND TURNOUT:

1. Number of registered voters in **county** for this election (Note: If the election was held only in part of the county, the number of registered voters in that part of the county for this election): **4906**
2. Number of voters voting *in person at the polls on Election Day*: **860**
3. Number of all voters voting *absentee including by mail, travel board, in-person, and military and overseas (UOCAVA)*: **323**
4. Total number of voters who voted in this election (auto-calculated as #2 + #3): **1183**

ABSENTEE VOTING

5. Please enter the number of absentee ballots that were rejected (exclude UOCAVA): **0**
- 5(a). Please enter the number of absentee ballots Not Received (Not returned to your county by the deadline): **1**

UOCAVA (Voters using the Federal Postcard Application and Federal Write-In Absentee Ballots)

6. The combined total number of absentee ballots sent by county to military and overseas voters: **0**
7. Total number of ballots in #6 returned by these voters. (Include any Federal Write-In Absentee Ballots, counted, because a UOCAVA did not return an official county ballot.): **0**
8. Total number of ballots in #7 counted: **0**

PROVISIONAL BALLOTS:

9. Total number of provisional ballots counted by county election board: **1**
10. Total number of provisional ballots not counted by county election board: **1**
11. The total number of provisional ballots cast by voters in the county in this election (System calculated as #9 + #10): **2**

ELECTION BUDGET AND EQUIPMENT:

12. BUDGETED cost for this election. Estimate if necessary: **13,000**
- 13(a). Provide the following information for the Election System Type:

| Election System Type | System Service Manufacturer | Voting System Model |
|-------------------------------------|-----------------------------|---------------------|
| Direct Recording Electronic Voting | ES&S | EVS 5.2.0.0 |
| Optical Scan Ballot Tabulator | ES&S | EVS 5.2.0.0 |
| ADA Compliant Ballot Marking Device | ES&S | EVS 5.2.0.0 |
| Election Management System | ES&S | EVS 5.2.0.0 |
| Hand Counted Paper Ballot | NO | |

13(b). Name the System Service Manufacturer used by the County in this Election **ES&S**

13(c). Describe any discrepancies with your voting system during the election if your County:

NONE

13(d). Name the Election Pollbook system service provider and the system model used by the county in this election:

| System Service Provider | System Model Number(s) |
|-------------------------|------------------------|
| KNOWiNK LLC | PollPad 2.5.8 |

13(e). Name the EPB System Service Manufacturer used by the County in this Election: **MicroVote**

CEB 9 Summary

ENCLOSURES:

14(a). Describe any malfunction or other problem with your voting system during the election. If your county did not experience any problems, please input "None" in the text box below. **NONE**

14(b). If you will be sending additional information on the malfunctions to IED, how will it be sent? **No Malfunction**

15. How will you be submitting Certified & Final Precinct Level Results for your county to IED? (Please use the Voter Status Counts by Precinct and Split report from SVRS): **USPS or Courier**

16. If you will be sending any additional information to the Election Division, how will it be sent? **USPS or Courier**

17. Please enter the name, title and mailing address for your county election board members.

| Title | Name | Party Name | Address & Street | City, State, and Zip | E-mail Address | Phone Number |
|---------------------------------------|--------------------|------------|------------------|----------------------|---------------------------------|--------------|
| Election Board Chairman | SUSAN M. PERSINGER | Democratic | 26 UNION STREET | LIBERTY IN 47353 | 1stdeputyclerk@unioncountyin.us | 7654586121 |
| Election Board Member | JEFF MATHEWS | Republican | 26 UNION STREET | LIBERTY IN 47353 | areaplan@unioncountyin.us | 7655800267 |
| Clerk/Secretary of the Election Board | LOREE A. PERSINGER | Democratic | 26 UNION STREET | LIBERTY IN 47353 | clerk@unioncountyin.us | 7654586121 |
| | | | | | | |
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CEB 9 Summary

Vanderburgh County

REGISTRATION AND TURNOUT:

1. Number of registered voters in **county** for this election (Note: If the election was held only in part of the county, the number of registered voters in that part of the county for this election): **127529**
2. Number of voters voting *in person at the polls on Election Day*: **9206**
3. Number of all voters voting *absentee including by mail, travel board, in-person, and military and overseas (UOCAVA)*: **4835**
4. Total number of voters who voted in this election (auto-calculated as #2 + #3): **14041**

ABSENTEE VOTING

5. Please enter the number of absentee ballots that were rejected (exclude UOCAVA): **17**
- 5(a). Please enter the number of absentee ballots Not Received (Not returned to your county by the deadline): **129**

UOCAVA (Voters using the Federal Postcard Application and Federal Write-In Absentee Ballots)

6. The combined total number of absentee ballots sent by county to military and overseas voters: **21**
7. Total number of ballots in #6 returned by these voters. (Include any Federal Write-In Absentee Ballots, counted, because a UOCAVA did not return an official county ballot.): **16**
8. Total number of ballots in #7 counted: **15**

PROVISIONAL BALLOTS:

9. Total number of provisional ballots counted by county election board: **0**
10. Total number of provisional ballots not counted by county election board: **0**
11. The total number of provisional ballots cast by voters in the county in this election (System calculated as #9 + #10): **0**

ELECTION BUDGET AND EQUIPMENT:

12. BUDGETED cost for this election. Estimate if necessary: **270,150**
- 13(a). Provide the following information for the Election System Type:

| Election System Type | System Service Manufacturer | Voting System Model |
|-------------------------------------|-----------------------------|---------------------|
| Direct Recording Electronic Voting | N/A | N/A |
| Optical Scan Ballot Tabulator | Unisyn | OpenElect 2.2 |
| ADA Compliant Ballot Marking Device | Unisyn | OpenElect 2.2 |
| Election Management System | Unisyn | OpenElect 2.2 |
| Hand Counted Paper Ballot | NO | |

- 13(b). Name the System Service Manufacturer used by the County in this Election **RBM**

- 13(c). Describe any discrepancies with your voting system during the election if your County:

None

- 13(d). Name the Election Pollbook system service provider and the system model used by the county in this election:

| System Service Provider | System Model Number(s) |
|-------------------------|------------------------|
| VR Systems | EVid 2.2 |

- 13(e). Name the EPB System Service Manufacturer used by the County in this Election: **RBM**

CEB 9 Summary

ENCLOSURES:

14(a). Describe any malfunction or other problem with your voting system during the election. If your county did not experience any problems, please input "None" in the text box below. **None**

14(b). If you will be sending additional information on the malfunctions to IED, how will it be sent? **No Malfunction**

15. How will you be submitting Certified & Final Precinct Level Results for your county to IED? (Please use the Voter Status Counts by Precinct and Split report from SVRS): **Electronic Submission**

16. If you will be sending any additional information to the Election Division, how will it be sent? **Email**

17. Please enter the name, title and mailing address for your county election board members.

| Title | Name | Party Name | Address & Street | City, State, and Zip | E-mail Address | Phone Number |
|---------------------------------------|-------------------|------------|------------------|--------------------------|----------------------------------|----------------|
| Election Board Chairman | JOSEPH H HARRISON | Republican | PO BOX 3343 | EVANSVILLE IN 47732-3343 | joe@harrisonlawfirm.biz | (812) 491-9350 |
| Election Board Member | DAVID M SHAW | Democratic | PO BOX 3343 | EVANSVILLE IN 47732-3343 | dshaw@evvlawoffice.com | (812) 568-7182 |
| Clerk/Secretary of the Election Board | CARLA J HAYDEN | Republican | PO BOX 3343 | EVANSVILLE IN 47732-3343 | chayden@vanderburghcounty.in.gov | (812) 435-5160 |
| | | | | | | |
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CEB 9 Summary

Vermillion County

REGISTRATION AND TURNOUT:

1. Number of registered voters in **county** for this election (Note: If the election was held only in part of the county, the number of registered voters in that part of the county for this election): **10576**
2. Number of voters voting *in person at the polls on Election Day*: **2210**
3. Number of all voters voting *absentee including by mail, travel board, in-person, and military and overseas (UOCAVA)*: **470**
4. Total number of voters who voted in this election (auto-calculated as #2 + #3): **2680**

ABSENTEE VOTING

5. Please enter the number of absentee ballots that were rejected (exclude UOCAVA): **4**
- 5(a). Please enter the number of absentee ballots Not Received (Not returned to your county by the deadline): **0**

UOCAVA (Voters using the Federal Postcard Application and Federal Write-In Absentee Ballots)

6. The combined total number of absentee ballots sent by county to military and overseas voters: **0**
7. Total number of ballots in #6 returned by these voters. (Include any Federal Write-In Absentee Ballots, counted, because a UOCAVA did not return an official county ballot.): **0**
8. Total number of ballots in #7 counted: **0**

PROVISIONAL BALLOTS:

9. Total number of provisional ballots counted by county election board: **0**
10. Total number of provisional ballots not counted by county election board: **0**
11. The total number of provisional ballots cast by voters in the county in this election (System calculated as #9 + #10): **0**

ELECTION BUDGET AND EQUIPMENT:

12. BUDGETED cost for this election. Estimate if necessary: **30,000.00**
- 13(a). Provide the following information for the Election System Type:

| Election System Type | System Service Manufacturer | Voting System Model |
|-------------------------------------|-----------------------------|---------------------|
| Direct Recording Electronic Voting | MicroVote | EMS 4.4 |
| Optical Scan Ballot Tabulator | MicroVote | EMS 4.4 |
| ADA Compliant Ballot Marking Device | MicroVote | EMS 4.4 |
| Election Management System | MicroVote | EMS 4.4 |
| Hand Counted Paper Ballot | NO | |

13(b). Name the System Service Manufacturer used by the County in this Election **MicroVote**

13(c). Describe any discrepancies with your voting system during the election if your County:

NONE

13(d). Name the Election Pollbook system service provider and the system model used by the county in this election:

| System Service Provider | System Model Number(s) |
|-------------------------|------------------------|
| KNOWiNK LLC | PollPad 3.0.1 |

13(e). Name the EPB System Service Manufacturer used by the County in this Election: **MicroVote**

CEB 9 Summary

ENCLOSURES:

14(a). Describe any malfunction or other problem with your voting system during the election. If your county did not experience any problems, please input "None" in the text box below. **NONE**

14(b). If you will be sending additional information on the malfunctions to IED, how will it be sent? **Electronic Submission**

15. How will you be submitting Certified & Final Precinct Level Results for your county to IED? (Please use the Voter Status Counts by Precinct and Split report from SVRS): **Electronic Submission**

16. If you will be sending any additional information to the Election Division, how will it be sent? **Electronic Submission**

17. Please enter the name, title and mailing address for your county election board members.

| Title | Name | Party Name | Address & Street | City, State, and Zip | E-mail Address | Phone Number |
|---------------------------------------|-------------------|------------|------------------|----------------------|------------------------------------|--------------|
| Clerk/Secretary of the Election Board | GRACIE L YORK | Republican | PO BOX 10 | NEWPORT IN 47966 | GRACIE.YORK@VERMILIONCOUNTY.IN.GOV | 7654925350 |
| Election Board Member | JOHN SANQUENETTI | Democratic | PO BOX 10 | NEWPORT IN 47966 | n/a | 7658328061 |
| Election Board Member | DANIEL LATINOVICH | Republican | 255 S MAIN ST | NEWPORT IN 47966 | n/a | 7658329582 |
| | | | | | | |
| | | | | | | |

CEB 9 Summary

Vigo County

REGISTRATION AND TURNOUT:

1. Number of registered voters in **county** for this election (Note: If the election was held only in part of the county, the number of registered voters in that part of the county for this election): **74390**
2. Number of voters voting *in person at the polls on Election Day*: **11022**
3. Number of all voters voting *absentee including by mail, travel board, in-person, and military and overseas (UOCAVA)*: **7557**
4. Total number of voters who voted in this election (auto-calculated as #2 + #3): **18579**

ABSENTEE VOTING

5. Please enter the number of absentee ballots that were rejected (exclude UOCAVA): **22**
- 5(a). Please enter the number of absentee ballots Not Received (Not returned to your county by the deadline): **59**

UOCAVA (Voters using the Federal Postcard Application and Federal Write-In Absentee Ballots)

6. The combined total number of absentee ballots sent by county to military and overseas voters: **13**
7. Total number of ballots in #6 returned by these voters. (Include any Federal Write-In Absentee Ballots, counted, because a UOCAVA did not return an official county ballot.): **8**
8. Total number of ballots in #7 counted: **8**

PROVISIONAL BALLOTS:

9. Total number of provisional ballots counted by county election board: **8**
10. Total number of provisional ballots not counted by county election board: **4**
11. The total number of provisional ballots cast by voters in the county in this election (System calculated as #9 + #10): **12**

ELECTION BUDGET AND EQUIPMENT:

12. BUDGETED cost for this election. Estimate if necessary: **181,500.00**
- 13(a). Provide the following information for the Election System Type:

| Election System Type | System Service Manufacturer | Voting System Model |
|-------------------------------------|-----------------------------|---------------------|
| Direct Recording Electronic Voting | Unisyn | OpenElect 2.1 |
| Optical Scan Ballot Tabulator | Unisyn | OpenElect 2.1 |
| ADA Compliant Ballot Marking Device | Unisyn | OpenElect 2.1 |
| Election Management System | Unisyn | OpenElect 2.1 |
| Hand Counted Paper Ballot | NO | |

- 13(b). Name the System Service Manufacturer used by the County in this Election **RBM**

- 13(c). Describe any discrepancies with your voting system during the election if your County:

None

- 13(d). Name the Election Pollbook system service provider and the system model used by the county in this election:

| System Service Provider | System Model Number(s) |
|-------------------------|------------------------|
| KNOWiNK LLC | PollPad 2.5.2 |

- 13(e). Name the EPB System Service Manufacturer used by the County in this Election: **RBM**

CEB 9 Summary

ENCLOSURES:

14(a). Describe any malfunction or other problem with your voting system during the election. If your county did not experience any problems, please input "None" in the text box below. **None**

14(b). If you will be sending additional information on the malfunctions to IED, how will it be sent? **Email**

15. How will you be submitting Certified & Final Precinct Level Results for your county to IED? (Please use the Voter Status Counts by Precinct and Split report from SVRS): **Electronic Submission**

16. If you will be sending any additional information to the Election Division, how will it be sent? **Email**

17. Please enter the name, title and mailing address for your county election board members.

| Title | Name | Party Name | Address & Street | City, State, and Zip | E-mail Address | Phone Number |
|---------------------------------------|-------------------|------------|------------------|---------------------------|-------------------------------|--------------|
| Clerk/Secretary of the Election Board | BRADLEY M. NEWMAN | Republican | 33 S. 3RD ST | TERRE HAUTE IN 47807-3425 | Brad.newman@vigocounty.in.gov | 812-462-3211 |
| Election Board Member | JOHN KESLER | Democrat | 33 S. 3RD ST | TERRE HAUTE IN 47807-3425 | johnakeslerii@aol.com | 812-240-1560 |
| Election Board Member | RANDALL GENTRY | Republican | 33 S. 3RD ST | TERRE HAUTE IN 47807-3425 | 123randyg@gmail.com | 812-201-3721 |
| | | | | | | |
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CEB 9 Summary

Wabash County

REGISTRATION AND TURNOUT:

1. Number of registered voters in **county** for this election (Note: If the election was held only in part of the county, the number of registered voters in that part of the county for this election): **20816**
2. Number of voters voting *in person at the polls on Election Day*: **2418**
3. Number of all voters voting *absentee including by mail, travel board, in-person, and military and overseas (UOCAVA)*: **886**
4. Total number of voters who voted in this election (auto-calculated as #2 + #3): **3304**

ABSENTEE VOTING

5. Please enter the number of absentee ballots that were rejected (exclude UOCAVA): **0**
- 5(a). Please enter the number of absentee ballots Not Received (Not returned to your county by the deadline): **9**

UOCAVA (Voters using the Federal Postcard Application and Federal Write-In Absentee Ballots)

6. The combined total number of absentee ballots sent by county to military and overseas voters: **0**
7. Total number of ballots in #6 returned by these voters. (Include any Federal Write-In Absentee Ballots, counted, because a UOCAVA did not return an official county ballot.): **0**
8. Total number of ballots in #7 counted: **0**

PROVISIONAL BALLOTS:

9. Total number of provisional ballots counted by county election board: **0**
10. Total number of provisional ballots not counted by county election board: **0**
11. The total number of provisional ballots cast by voters in the county in this election (System calculated as #9 + #10): **0**

ELECTION BUDGET AND EQUIPMENT:

12. BUDGETED cost for this election. Estimate if necessary: **39,000.00**
- 13(a). Provide the following information for the Election System Type:

| Election System Type | System Service Manufacturer | Voting System Model |
|-------------------------------------|-----------------------------|---------------------|
| Direct Recording Electronic Voting | MicroVote | EMS 4.4 |
| Optical Scan Ballot Tabulator | MicroVote | EMS 4.4 |
| ADA Compliant Ballot Marking Device | MicroVote | EMS 4.4 |
| Election Management System | MicroVote | EMS 4.4 |
| Hand Counted Paper Ballot | NO | |

13(b). Name the System Service Manufacturer used by the County in this Election **MicroVote**

13(c). Describe any discrepancies with your voting system during the election if your County:
none

13(d). Name the Election Pollbook system service provider and the system model used by the county in this election:

| System Service Provider | System Model Number(s) |
|-------------------------|------------------------|
| KNOWiNK LLC | PollPad 2.5 |

13(e). Name the EPB System Service Manufacturer used by the County in this Election: **KNOWiNK LLC**

CEB 9 Summary

ENCLOSURES:

14(a). Describe any malfunction or other problem with your voting system during the election. If your county did not experience any problems, please input "None" in the text box below. **none**

14(b). If you will be sending additional information on the malfunctions to IED, how will it be sent? **No Malfunction**

15. How will you be submitting Certified & Final Precinct Level Results for your county to IED? (Please use the Voter Status Counts by Precinct and Split report from SVRS): **Electronic Submission**

16. If you will be sending any additional information to the Election Division, how will it be sent? **Email**

17. Please enter the name, title and mailing address for your county election board members.

| Title | Name | Party Name | Address & Street | City, State, and Zip | E-mail Address | Phone Number |
|---------------------------------------|---------------|------------|------------------|----------------------|----------------------------------|--------------|
| Clerk/Secretary of the Election Board | LORI J DRAPER | Republican | 69 W HILL ST | WABASH IN 46992 | clerk.draper@wabashcounty.in.gov | 2605630661 |
| Election Board Member | NAN ROE | Republican | 69 W HILL ST | WABASH IN 46992 | dgroemd@hotmail.com | 2605630661 |
| Election Board Member | NANCY WHITMER | Democratic | 69 W HILL ST | WABASH IN 46992 | nanjwhit@yahoo.com | 2605712486 |
| | | | | | | |
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CEB 9 Summary

Warren County

REGISTRATION AND TURNOUT:

1. Number of registered voters in **county** for this election (Note: If the election was held only in part of the county, the number of registered voters in that part of the county for this election): **6371**
2. Number of voters voting *in person at the polls on Election Day*: **1185**
3. Number of all voters voting *absentee including by mail, travel board, in-person, and military and overseas (UOCAVA)*: **253**
4. Total number of voters who voted in this election (auto-calculated as #2 + #3): **1438**

ABSENTEE VOTING

5. Please enter the number of absentee ballots that were rejected (exclude UOCAVA): **0**
- 5(a). Please enter the number of absentee ballots Not Received (Not returned to your county by the deadline): **2**

UOCAVA (Voters using the Federal Postcard Application and Federal Write-In Absentee Ballots)

6. The combined total number of absentee ballots sent by county to military and overseas voters: **0**
7. Total number of ballots in #6 returned by these voters. (Include any Federal Write-In Absentee Ballots, counted, because a UOCAVA did not return an official county ballot.): **0**
8. Total number of ballots in #7 counted: **0**

PROVISIONAL BALLOTS:

9. Total number of provisional ballots counted by county election board: **0**
10. Total number of provisional ballots not counted by county election board: **0**
11. The total number of provisional ballots cast by voters in the county in this election (System calculated as #9 + #10): **0**

ELECTION BUDGET AND EQUIPMENT:

12. BUDGETED cost for this election. Estimate if necessary: **34,000**
- 13(a). Provide the following information for the Election System Type:

| Election System Type | System Service Manufacturer | Voting System Model |
|-------------------------------------|-----------------------------|---------------------|
| Direct Recording Electronic Voting | Hart InterCivic | HVS 6.2.2 |
| Optical Scan Ballot Tabulator | Hart InterCivic | HVS 6.2.2 |
| ADA Compliant Ballot Marking Device | Hart InterCivic | HVS 6.2.2 |
| Election Management System | Hart InterCivic | HVS 6.2.2 |
| Hand Counted Paper Ballot | NO | |

13(b). Name the System Service Manufacturer used by the County in this Election **GBS**

13(c). Describe any discrepancies with your voting system during the election if your County:

None

13(d). Name the Election Pollbook system service provider and the system model used by the county in this election:

| System Service Provider | System Model Number(s) |
|-------------------------|------------------------|
| KNOWiNK LLC | PollPad 2.5 |

13(e). Name the EPB System Service Manufacturer used by the County in this Election: **MicroVote**

CEB 9 Summary

ENCLOSURES:

14(a). Describe any malfunction or other problem with your voting system during the election. If your county did not experience any problems, please input "None" in the text box below. **NONE**

14(b). If you will be sending additional information on the malfunctions to IED, how will it be sent? **No Malfunction**

15. How will you be submitting Certified & Final Precinct Level Results for your county to IED? (Please use the Voter Status Counts by Precinct and Split report from SVRS): **Email**

16. If you will be sending any additional information to the Election Division, how will it be sent? **Email**

17. Please enter the name, title and mailing address for your county election board members.

| Title | Name | Party Name | Address & Street | City, State, and Zip | E-mail Address | Phone Number |
|---------------------------------------|--------------------|------------|---------------------|-----------------------|---------------------------|--------------|
| Election Board Chairman | ROBERT LANE SELLS | Republican | 125 N MONROE STREET | WILLIAMSPORT IN 47993 | LANE.SELLS@OUTLOOK.COM | 7653071028 |
| Election Board Member | DONNA LYON | Democratic | 125 N MONROE STREET | WILLIAMSPORT IN 47993 | DDLION@CMOCAST.COM | 7652993628 |
| Clerk/Secretary of the Election Board | MICHELLE A HETRICK | Republican | 125 N MONROE STREET | WILLIAMSPORT IN 47993 | clerk@warrencounty.in.gov | 7657623510 |
| | | | | | | |
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CEB 9 Summary

Warrick County

REGISTRATION AND TURNOUT:

1. Number of registered voters in **county** for this election (Note: If the election was held only in part of the county, the number of registered voters in that part of the county for this election): **47267**
2. Number of voters voting *in person at the polls on Election Day*: **3475**
3. Number of all voters voting *absentee including by mail, travel board, in-person, and military and overseas (UOCAVA)*: **1636**
4. Total number of voters who voted in this election (auto-calculated as #2 + #3): **5111**

ABSENTEE VOTING

5. Please enter the number of absentee ballots that were rejected (exclude UOCAVA): **7**
- 5(a). Please enter the number of absentee ballots Not Received (Not returned to your county by the deadline): **36**

UOCAVA (Voters using the Federal Postcard Application and Federal Write-In Absentee Ballots)

6. The combined total number of absentee ballots sent by county to military and overseas voters: **1**
7. Total number of ballots in #6 returned by these voters. (Include any Federal Write-In Absentee Ballots, counted, because a UOCAVA did not return an official county ballot.): **0**
8. Total number of ballots in #7 counted: **0**

PROVISIONAL BALLOTS:

9. Total number of provisional ballots counted by county election board: **1**
10. Total number of provisional ballots not counted by county election board: **0**
11. The total number of provisional ballots cast by voters in the county in this election (System calculated as #9 + #10): **1**

ELECTION BUDGET AND EQUIPMENT:

12. BUDGETED cost for this election. Estimate if necessary: **51,000.00**
- 13(a). Provide the following information for the Election System Type:

| Election System Type | System Service Manufacturer | Voting System Model |
|-------------------------------------|-----------------------------|---------------------|
| Direct Recording Electronic Voting | MicroVote | EMS 4.4 |
| Optical Scan Ballot Tabulator | MicroVote | EMS 4.4 |
| ADA Compliant Ballot Marking Device | MicroVote | EMS 4.4 |
| Election Management System | MicroVote | EMS 4.4 |
| Hand Counted Paper Ballot | NO | |

13(b). Name the System Service Manufacturer used by the County in this Election **MicroVote**

13(c). Describe any discrepancies with your voting system during the election if your County:

None

13(d). Name the Election Pollbook system service provider and the system model used by the county in this election:

| System Service Provider | System Model Number(s) |
|-------------------------|------------------------|
| KNOWiNK LLC | PollPad 3.0 |

13(e). Name the EPB System Service Manufacturer used by the County in this Election: **KNOWiNK LLC**

CEB 9 Summary

ENCLOSURES:

14(a). Describe any malfunction or other problem with your voting system during the election. If your county did not experience any problems, please input "None" in the text box below. **None**

14(b). If you will be sending additional information on the malfunctions to IED, how will it be sent? **No Malfunction**

15. How will you be submitting Certified & Final Precinct Level Results for your county to IED? (Please use the Voter Status Counts by Precinct and Split report from SVRS): **Electronic Submission**

16. If you will be sending any additional information to the Election Division, how will it be sent? **Email**

17. Please enter the name, title and mailing address for your county election board members.

| Title | Name | Party Name | Address & Street | City, State, and Zip | E-mail Address | Phone Number |
|---------------------------------------|----------------|------------|-----------------------------|----------------------|----------------------------|--------------|
| Clerk/Secretary of the Election Board | PATRICIA PERRY | Republican | ONE COUNTY SQUARE SUITE 220 | BOONVILLE IN 47601 | clerk@warrickcounty.gov | 8128976163 |
| Election Board Chairman | ANDREW SKINNER | Republican | ONE COUNTY SQUARE SUITE 220 | BOONVILLE IN 47601 | AES@fine-hatfield.com | 8124318050 |
| Election Board Member | GRANT GERLING | Democrat | ONE COUNTY SQUARE SUITE 220 | BOONVILLE IN 47601 | grant@gerlinginsurance.com | 8124554173 |
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CEB 9 Summary

Washington County

REGISTRATION AND TURNOUT:

1. Number of registered voters in **county** for this election (Note: If the election was held only in part of the county, the number of registered voters in that part of the county for this election): **18925**
2. Number of voters voting *in person at the polls on Election Day*: **3402**
3. Number of all voters voting *absentee including by mail, travel board, in-person, and military and overseas (UOCAVA)*: **503**
4. Total number of voters who voted in this election (auto-calculated as #2 + #3): **3905**

ABSENTEE VOTING

5. Please enter the number of absentee ballots that were rejected (exclude UOCAVA): **0**
- 5(a). Please enter the number of absentee ballots Not Received (Not returned to your county by the deadline): **7**

UOCAVA (Voters using the Federal Postcard Application and Federal Write-In Absentee Ballots)

6. The combined total number of absentee ballots sent by county to military and overseas voters: **1**
7. Total number of ballots in #6 returned by these voters. (Include any Federal Write-In Absentee Ballots, counted, because a UOCAVA did not return an official county ballot.): **0**
8. Total number of ballots in #7 counted: **0**

PROVISIONAL BALLOTS:

9. Total number of provisional ballots counted by county election board: **0**
10. Total number of provisional ballots not counted by county election board: **0**
11. The total number of provisional ballots cast by voters in the county in this election (System calculated as #9 + #10): **0**

ELECTION BUDGET AND EQUIPMENT:

12. BUDGETED cost for this election. Estimate if necessary: **48,000.00**
- 13(a). Provide the following information for the Election System Type:

| Election System Type | System Service Manufacturer | Voting System Model |
|-------------------------------------|-----------------------------|---------------------|
| Direct Recording Electronic Voting | Hart InterCivic | Verity 2.5 |
| Optical Scan Ballot Tabulator | Hart InterCivic | Verity 2.5 |
| ADA Compliant Ballot Marking Device | Hart InterCivic | Verity 2.5 |
| Election Management System | N/A | N/A |
| Hand Counted Paper Ballot | NO | |

13(b). Name the System Service Manufacturer used by the County in this Election **Harp**.

13(c). Describe any discrepancies with your voting system during the election if your County:
None

13(d). Name the Election Pollbook system service provider and the system model used by the county in this election:

| System Service Provider | System Model Number(s) |
|-------------------------|------------------------|
| KNOWiNK LLC | PollPad 3.0.1 |

13(e). Name the EPB System Service Manufacturer used by the County in this Election: **MicroVote**

CEB 9 Summary

ENCLOSURES:

14(a). Describe any malfunction or other problem with your voting system during the election. If your county did not experience any problems, please input "None" in the text box below.

Our Franklin precinct, hit Provisional Ballot on their poll pad, 4 times. The voters were not actual provisional ballot voters. Documentation has been made.

14(b). If you will be sending additional information on the malfunctions to IED, how will it be sent? **Email**

15. How will you be submitting Certified & Final Precinct Level Results for your county to IED? (Please use the Voter Status Counts by Precinct and Split report from SVRS): **Electronic Submission**

16. If you will be sending any additional information to the Election Division, how will it be sent? **Email**

17. Please enter the name, title and mailing address for your county election board members.

| Title | Name | Party Name | Address & Street | City, State, and Zip | E-mail Address | Phone Number |
|---------------------------------------|--------------------|------------|--------------------------------------|----------------------|---------------------------------|--------------|
| Election Board Member | MAURICE DAY | Democratic | STEPHANIE K. ROCKEY, CLERK OF COURTS | SALEM IN 47167 | srockey@washingtoncounty.in.gov | 812-883-5748 |
| Election Board Member | LAURIE JACKSON | Republican | STEPHANIE K. ROCKEY, CLERK OF COURTS | SALEM IN 47167 | srockey@washingtoncounty.in.gov | 812-883-5748 |
| Clerk/Secretary of the Election Board | STEPHANIE K ROCKEY | Republican | STEPHANIE K. ROCKEY, CLERK OF COURTS | SALEM IN 47167 | srockey@washingtoncounty.in.gov | 8128835748 |
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CEB 9 Summary

Wayne County

REGISTRATION AND TURNOUT:

1. Number of registered voters in **county** for this election (Note: If the election was held only in part of the county, the number of registered voters in that part of the county for this election): **42707**
2. Number of voters voting *in person at the polls on Election Day*: **3416**
3. Number of all voters voting *absentee including by mail, travel board, in-person, and military and overseas (UOCAVA)*: **2246**
4. Total number of voters who voted in this election (auto-calculated as #2 + #3): **5662**

ABSENTEE VOTING

5. Please enter the number of absentee ballots that were rejected (exclude UOCAVA): **0**
- 5(a). Please enter the number of absentee ballots Not Received (Not returned to your county by the deadline): **42**

UOCAVA (Voters using the Federal Postcard Application and Federal Write-In Absentee Ballots)

6. The combined total number of absentee ballots sent by county to military and overseas voters: **1**
7. Total number of ballots in #6 returned by these voters. (Include any Federal Write-In Absentee Ballots, counted, because a UOCAVA did not return an official county ballot.): **1**
8. Total number of ballots in #7 counted: **1**

PROVISIONAL BALLOTS:

9. Total number of provisional ballots counted by county election board: **0**
10. Total number of provisional ballots not counted by county election board: **3**
11. The total number of provisional ballots cast by voters in the county in this election (System calculated as #9 + #10): **3**

ELECTION BUDGET AND EQUIPMENT:

12. BUDGETED cost for this election. Estimate if necessary: **54,090.26**
- 13(a). Provide the following information for the Election System Type:

| Election System Type | System Service Manufacturer | Voting System Model |
|-------------------------------------|-----------------------------|---------------------|
| Direct Recording Electronic Voting | Hart InterCivic | Verity 2.5 |
| Optical Scan Ballot Tabulator | Hart InterCivic | Verity 2.5 |
| ADA Compliant Ballot Marking Device | Hart InterCivic | Verity 2.5 |
| Election Management System | Hart InterCivic | Verity 2.5 |
| Hand Counted Paper Ballot | NO | |

13(b). Name the System Service Manufacturer used by the County in this Election **Harp**.

13(c). Describe any discrepancies with your voting system during the election if your County:
none

13(d). Name the Election Pollbook system service provider and the system model used by the county in this election:

| System Service Provider | System Model Number(s) |
|-------------------------|------------------------|
| KNOWiNK LLC | PollPad 2.5 |

13(e). Name the EPB System Service Manufacturer used by the County in this Election: **KNOWiNK LLC**

CEB 9 Summary

ENCLOSURES:

14(a). Describe any malfunction or other problem with your voting system during the election. If your county did not experience any problems, please input "None" in the text box below. **none**

14(b). If you will be sending additional information on the malfunctions to IED, how will it be sent? **Email**

15. How will you be submitting Certified & Final Precinct Level Results for your county to IED? (Please use the Voter Status Counts by Precinct and Split report from SVRS): **Email**

16. If you will be sending any additional information to the Election Division, how will it be sent? **Email**

17. Please enter the name, title and mailing address for your county election board members.

| Title | Name | Party Name | Address & Street | City, State, and Zip | E-mail Address | Phone Number |
|---------------------------------------|------------------|------------|------------------|----------------------|--------------------------------|--------------|
| Clerk/Secretary of the Election Board | DEBRA BERRY | Republican | 301 E MAIN ST | RICHMOND IN 47374- | clerk@co.wayne.in.us | 7659739224 |
| Election Board Chairman | J CLAYTON MILLER | Republican | 301 E MAIN ST | RICHMOND IN 47374- | clay_is_@hotmail.com | 7652202119 |
| Election Board Member | JAMES C HARDIE | Democratic | 301 E MAIN ST | RICHMOND IN 47374- | info@waynecountydemocrates.com | 7656763367 |
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CEB 9 Summary

Wells County

REGISTRATION AND TURNOUT:

1. Number of registered voters in **county** for this election (Note: If the election was held only in part of the county, the number of registered voters in that part of the county for this election): **19132**
2. Number of voters voting *in person at the polls on Election Day*: **3127**
3. Number of all voters voting *absentee including by mail, travel board, in-person, and military and overseas (UOCAVA)*: **1263**
4. Total number of voters who voted in this election (auto-calculated as #2 + #3): **4390**

ABSENTEE VOTING

5. Please enter the number of absentee ballots that were rejected (exclude UOCAVA): **0**
- 5(a). Please enter the number of absentee ballots Not Received (Not returned to your county by the deadline): **11**

UOCAVA (Voters using the Federal Postcard Application and Federal Write-In Absentee Ballots)

6. The combined total number of absentee ballots sent by county to military and overseas voters: **2**
7. Total number of ballots in #6 returned by these voters. (Include any Federal Write-In Absentee Ballots, counted, because a UOCAVA did not return an official county ballot.): **0**
8. Total number of ballots in #7 counted: **0**

PROVISIONAL BALLOTS:

9. Total number of provisional ballots counted by county election board: **0**
10. Total number of provisional ballots not counted by county election board: **0**
11. The total number of provisional ballots cast by voters in the county in this election (System calculated as #9 + #10): **0**

ELECTION BUDGET AND EQUIPMENT:

12. BUDGETED cost for this election. Estimate if necessary: **21,757.00**
- 13(a). Provide the following information for the Election System Type:

| Election System Type | System Service Manufacturer | Voting System Model |
|-------------------------------------|-----------------------------|---------------------|
| Direct Recording Electronic Voting | MicroVote | EMS 4.4 |
| Optical Scan Ballot Tabulator | MicroVote | EMS 4.4 |
| ADA Compliant Ballot Marking Device | MicroVote | EMS 4.4 |
| Election Management System | MicroVote | EMS 4.4 |
| Hand Counted Paper Ballot | NO | |

13(b). Name the System Service Manufacturer used by the County in this Election **MicroVote**

13(c). Describe any discrepancies with your voting system during the election if your County:

None

13(d). Name the Election Pollbook system service provider and the system model used by the county in this election:

| System Service Provider | System Model Number(s) |
|-------------------------|------------------------|
| KNOWiNK LLC | PollPad 3.0.1 |

13(e). Name the EPB System Service Manufacturer used by the County in this Election: **KNOWiNK LLC**

CEB 9 Summary

ENCLOSURES:

14(a). Describe any malfunction or other problem with your voting system during the election. If your county did not experience any problems, please input "None" in the text box below. **None**

14(b). If you will be sending additional information on the malfunctions to IED, how will it be sent? **No Malfunction**

15. How will you be submitting Certified & Final Precinct Level Results for your county to IED? (Please use the Voter Status Counts by Precinct and Split report from SVRS): **Electronic Submission**

16. If you will be sending any additional information to the Election Division, how will it be sent? **Email**

17. Please enter the name, title and mailing address for your county election board members.

| Title | Name | Party Name | Address & Street | City, State, and Zip | E-mail Address | Phone Number |
|---------------------------------------|---------------|------------|--------------------------------|----------------------|----------------------------|--------------|
| Clerk/Secretary of the Election Board | BETH DAVIS | Republican | 102 W MARKET STREET, SUITE 201 | BLUFFTON IN 46714 | clerk@wellscounty.org | 2608246482 |
| Election Board Chairman | ROY R JOHNSON | Republican | 102 W MARKET STREET, SUITE 201 | BLUFFTON IN 46714 | royrjohnson@adamswells.com | 2608240500 |
| Election Board Member | LARRY J SELL | Democratic | 102 W MARKET STREET, SUITE 201 | BLUFFTON IN 46714 | ljsell@hotmail.com | 2608242995 |
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CEB 9 Summary

White County

REGISTRATION AND TURNOUT:

1. Number of registered voters in **county** for this election (Note: If the election was held only in part of the county, the number of registered voters in that part of the county for this election): **17287**
2. Number of voters voting *in person at the polls on Election Day*: **2429**
3. Number of all voters voting *absentee including by mail, travel board, in-person, and military and overseas (UOCAVA)*: **1098**
4. Total number of voters who voted in this election (auto-calculated as #2 + #3): **3527**

ABSENTEE VOTING

5. Please enter the number of absentee ballots that were rejected (exclude UOCAVA): **5**
- 5(a). Please enter the number of absentee ballots Not Received (Not returned to your county by the deadline): **8**

UOCAVA (Voters using the Federal Postcard Application and Federal Write-In Absentee Ballots)

6. The combined total number of absentee ballots sent by county to military and overseas voters: **1**
7. Total number of ballots in #6 returned by these voters. (Include any Federal Write-In Absentee Ballots, counted, because a UOCAVA did not return an official county ballot.): **1**
8. Total number of ballots in #7 counted: **1**

PROVISIONAL BALLOTS:

9. Total number of provisional ballots counted by county election board: **1**
10. Total number of provisional ballots not counted by county election board: **0**
11. The total number of provisional ballots cast by voters in the county in this election (System calculated as #9 + #10): **1**

ELECTION BUDGET AND EQUIPMENT:

12. BUDGETED cost for this election. Estimate if necessary: **48,000**
- 13(a). Provide the following information for the Election System Type:

| Election System Type | System Service Manufacturer | Voting System Model |
|-------------------------------------|-----------------------------|---------------------|
| Direct Recording Electronic Voting | MicroVote | EMS 4.4 |
| Optical Scan Ballot Tabulator | MicroVote | EMS 4.4 |
| ADA Compliant Ballot Marking Device | MicroVote | EMS 4.4 |
| Election Management System | MicroVote | EMS 4.4 |
| Hand Counted Paper Ballot | NO | |

13(b). Name the System Service Manufacturer used by the County in this Election **MicroVote**

13(c). Describe any discrepancies with your voting system during the election if your County:
none

13(d). Name the Election Pollbook system service provider and the system model used by the county in this election:

| System Service Provider | System Model Number(s) |
|-------------------------|------------------------|
| KNOWiNK LLC | PollPad 3.0.1 |

13(e). Name the EPB System Service Manufacturer used by the County in this Election: **KNOWiNK LLC**

CEB 9 Summary

ENCLOSURES:

14(a). Describe any malfunction or other problem with your voting system during the election. If your county did not experience any problems, please input "None" in the text box below. **none**

14(b). If you will be sending additional information on the malfunctions to IED, how will it be sent? **No Malfunction**

15. How will you be submitting Certified & Final Precinct Level Results for your county to IED? (Please use the Voter Status Counts by Precinct and Split report from SVRS): **Email**

16. If you will be sending any additional information to the Election Division, how will it be sent? **Electronic Submission**

17. Please enter the name, title and mailing address for your county election board members.

| Title | Name | Party Name | Address & Street | City, State, and Zip | E-mail Address | Phone Number |
|---------------------------------------|----------------------|------------|------------------|----------------------|-----------------------------------|--------------|
| Clerk/Secretary of the Election Board | LAURA A COSGRAY | Republican | PO BOX 350 | MONTICELLO IN 47960 | laura.cosgray@whitecountyin.us | 5745831531 |
| Election Board Chairman | CHRISTOPHER PHILLIPS | Republican | PO BOX 350 | MONTICELLO IN 47960 | christopher.phillipslaw@gmail.com | 5745831531 |
| Election Board Member | GARY OVERDORF | Democrat | PO BOX 350 | MONTICELLO IN 47960 | solomogo@comcast.net | 5745831531 |
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CEB 9 Summary

Whitley County

REGISTRATION AND TURNOUT:

1. Number of registered voters in **county** for this election (Note: If the election was held only in part of the county, the number of registered voters in that part of the county for this election): **23820**
2. Number of voters voting *in person at the polls on Election Day*: **3772**
3. Number of all voters voting *absentee including by mail, travel board, in-person, and military and overseas (UOCAVA)*: **1435**
4. Total number of voters who voted in this election (auto-calculated as #2 + #3): **5207**

ABSENTEE VOTING

5. Please enter the number of absentee ballots that were rejected (exclude UOCAVA): **0**
- 5(a). Please enter the number of absentee ballots Not Received (Not returned to your county by the deadline): **7**

UOCAVA (Voters using the Federal Postcard Application and Federal Write-In Absentee Ballots)

6. The combined total number of absentee ballots sent by county to military and overseas voters: **8**
7. Total number of ballots in #6 returned by these voters. (Include any Federal Write-In Absentee Ballots, counted, because a UOCAVA did not return an official county ballot.): **7**
8. Total number of ballots in #7 counted: **7**

PROVISIONAL BALLOTS:

9. Total number of provisional ballots counted by county election board: **0**
10. Total number of provisional ballots not counted by county election board: **0**
11. The total number of provisional ballots cast by voters in the county in this election (System calculated as #9 + #10): **0**

ELECTION BUDGET AND EQUIPMENT:

12. BUDGETED cost for this election. Estimate if necessary: **43,617**
- 13(a). Provide the following information for the Election System Type:

| Election System Type | System Service Manufacturer | Voting System Model |
|-------------------------------------|-----------------------------|---------------------|
| Direct Recording Electronic Voting | MicroVote | EMS 4.4 |
| Optical Scan Ballot Tabulator | MicroVote | EMS 4.4 |
| ADA Compliant Ballot Marking Device | MicroVote | EMS 4.4 |
| Election Management System | MicroVote | EMS 4.4 |
| Hand Counted Paper Ballot | NO | |

13(b). Name the System Service Manufacturer used by the County in this Election **MicroVote**

13(c). Describe any discrepancies with your voting system during the election if your County:

None

13(d). Name the Election Pollbook system service provider and the system model used by the county in this election:

| System Service Provider | System Model Number(s) |
|-------------------------|------------------------|
| KNOWiNK LLC | PollPad 2.5 |

13(e). Name the EPB System Service Manufacturer used by the County in this Election: **KNOWiNK LLC**

CEB 9 Summary

ENCLOSURES:

14(a). Describe any malfunction or other problem with your voting system during the election. If your county did not experience any problems, please input "None" in the text box below. **None**

14(b). If you will be sending additional information on the malfunctions to IED, how will it be sent? **No Malfunction**

15. How will you be submitting Certified & Final Precinct Level Results for your county to IED? (Please use the Voter Status Counts by Precinct and Split report from SVRS): **Electronic Submission**

16. If you will be sending any additional information to the Election Division, how will it be sent? **Email**

17. Please enter the name, title and mailing address for your county election board members.

| Title | Name | Party Name | Address & Street | City, State, and Zip | E-mail Address | Phone Number |
|---------------------------------------|-------------------|------------|--------------------|------------------------|--------------------------|--------------|
| Clerk/Secretary of the Election Board | CINDY DOOLITTLE | Republican | 101 W VAN BUREN ST | COLUMBIA CITY IN 46725 | wcclerk@whitleygov.com | 2602442301 |
| Election Board Chairman | TAM MITCHELL | Democratic | 101 W VAN BUREN ST | COLUMBIA CITY IN 46725 | tammitchell@hotmail.com | 2602483164 |
| Election Board Member | LAURELL SCHROEDER | Republican | 101 W VAN BUREN ST | COLUMBIA CITY IN 46725 | laurell.hodges@yahoo.com | 2602483164 |
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