Voting System Post-Election Audit Report

County:	Date of Election:	MST KH 04/09/202	24
Type of Audit (check applicable box):		Automated Inde	pendent
Precinct Number(s):			
Race (if Manual Audit):ALL			
 Overall accuracy of the audit: 100% 			
 Description of any problems or discrepancies encountered: N/A 			
3. Likely cause of such problems or discrepancies: N/A			
4. Recommended corrective action circumstances in future elections N/A		ding or mitigating su	ch
Check applicable box and sign below: We hereby certify that the report of accurate and that attached are precinct s	the voting system au		
☐ We hereby certify that a voting system conducted under s. 102.166, Florida Sta		ne because a manual	recount was
Signatures of County Canvassing Board	members:		
Raymond Forbess Jr.	BERG)	04/11/2024
Printed Name Signature	gnature	1 00	Date
Chris H. Chambless	hi allika	ullelie	04/11/2024
Printed Name Sig	gnature		Date
Alexandra Compere	XX		04/11/2024
Printed Name	gnature		Date

DS-DE 107 (eff. 01/2014)

Rule 1S-5.026, F.A.C.