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| armpostcard | **Certification of Public Testing**  The following testing procedures are required for voting systems certified for use in Montana pursuant to Montana Code Annotated and Administrative Rule: *No more than 30 days prior to an election in which a voting system is used, the election administrator shall publicly test and certify that the system is performing properly*. [13-17-212(1), MCA](http://leg.mt.gov/bills/mca/title_0130/chapter_0170/part_0020/section_0120/0130-0170-0020-0120.html) |
| Instructions:   * 1. Fill in the name of the election administrator and the name of the county   2. Select the voting system/ballot marking device   3. Enter the amount of machines tested   4. Complete the date of signature   5. Election Administrator and at least one witness must sign certification   6. File with the Secretary of State and retain a copy for county records | |

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| I, *name of election administrator*, Election Administrator for the County of *name of county*, State of Montana, hereby certify that I have, **in the presence of at least one witness**, tested the programming of the voting system(s)/ballot marking device listed below. | |
| Voting System/Ballot Marking Device  *select voting system/ballot marking device*  *select voting system/ballot marking device*  *select voting system/ballot marking device*  *select voting system/ballot marking device* | Amount of Machines Tested  *# of machines tested*  *# of machines tested*  *# of machines tested*  *# of machines tested* |
| In accordance with Montana laws, administrative rules, and testing guidelines, we find that the system(s) is/are performing properly.  Signed on this date: *select a date*  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Signature of Election Administrator  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Signature of Witness  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Signature of Witness (if present)  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Signature of Witness (if present)  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Signature of Witness (if present) | |