STATEMENT OF THE MUNICIPAL CLERK
IF NO PROVISIONAL BALLOTS WERE REHABILITATED BETWEEN 8 P.M. ELECTION NIGHT AND 4 P.M. ON THE FRIDAY AFTER THE ELECTION

Reconciliation of Provisional Ballots Processed

____________________________, ___________ Reporting Unit:_____________________
(Date of Primary or Election) (Wards in Reporting Unit)

☐ No provisional ballots were rehabilitated. Election night results stand.

*CERTIFICATION OF MUNICIPAL CLERK
(If no provisional ballots rehabilitated by deadline)

I, the undersigned, certify that I am the Municipal Clerk for _____________________________.
(insert municipality and county)

I certify that no provisional ballots were rehabilitated after the close of the polls and before 4 p.m. on the Friday after the election. I further certify that the results of the municipal election certified on Election Night by the Municipal Board of Canvassers are the official election results.

__________________________________________, Clerk       ________________________
(Name of Municipal Clerk)                        (Date)

The Statement of the Municipal Clerk should be attached to the municipal canvass (if there were municipal offices or referenda). A copy should be provided to any district that had contests or referenda on the ballot at the election.
STATEMENT OF THE MUNICIPAL BOARD OF CANVASSERS

Reconciliation Provisional Ballots Processed
(If no provisional ballots have been rehabilitated, see the Municipal Clerk Certification on the first page of this document.)

____________________________, __________ Reporting Unit: ____________________
(Date of Primary or Election) (Wards in Reporting Unit)

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To be completed by Municipal Clerk

1. Provisional Ballots
   a. Number of provisional ballots issued: ________ (tamper-evident seal number)
   b. Number of provisional ballots rehabilitated by deadline and delivered to MBOC: ________
   c. Number of outstanding provisional ballots remaining: ________
      (2a – 2b)

To be completed by MBOC

2. Provisional Ballot Processing
   a. Enter tamper-evident seal number on provisional ballot container: ________
      Verify against number on line 2a in Section 1 above and initial here: ________
   b. Total number of provisional ballots counted by MBOC: ________
   c. Total number of provisional ballots rejected by MBOC: ________
   d. Total number of provisional ballots processed by MBOC:
      (2b + 2c. Must equal 1b.)

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STATEMENT OF TALLY OF PROVISIONAL BALLOTS

_____________________________________________, __________

(Date of Primary or Election)

The total number of votes tallied for __________________________ was ________, of which

________________________ received _______

(candidate’s name)

________________________ received _______

(candidate’s name)

________________________ received _______

(candidate’s name)

________________________ received _______

(candidate’s name)

The total number of votes tallied for __________________________ was ________, of which

________________________ received _______

(candidate’s name)

________________________ received _______

(candidate’s name)

________________________ received _______

(candidate’s name)

The total number of votes tallied for __________________________ was ________, of which

________________________ received _______

(candidate’s name)

________________________ received _______

(candidate’s name)

________________________ received _______

(candidate’s name)

The total number of votes tallied for __________________________ was ________, of which

________________________ received _______

(candidate’s name)

________________________ received _______

(candidate’s name)

________________________ received _______

(candidate’s name)
CERTIFICATION OF MUNICIPAL BOARD OF CANVASSERS

We, the undersigned, certify that we are the members of the Municipal Board of Canvassers for

___________________________________________________________.

(insert municipality and county)

We certify that the above Reconciliation of Provisional Ballots Processed and the attached Statement of Tally of Provisional Ballots prepared by us, are correct and true as compiled from the provisional ballots provided to us by

__________________________________________, Clerk.

(Name of Municipal Clerk)

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BOARD OF CANVASSERS

(1) _____________________________________

(2) _____________________________________

(3) _____________________________________

(4) _____________________________________

(5) _____________________________________

______________________________

(Date)

The Statement of the Municipal Board of Canvassers should be attached to the amended municipal canvass (if there were municipal offices or referenda). A copy should be included with amended returns sent to any district that had contests or referenda on the ballot at the election.