

ELECTION OBSERVER (NAME/DATE EACH PAGE) \_\_\_\_\_ DATE \_\_\_\_\_

Please read this entire **Observation Sheet** to familiarize yourself with common complaints.

Name of Observer:	Municipality:
Address of Polling Place:	Ward/Election District:
Arrival Time:	Departure Time:

Note: If you see the law being misapplied, or think you do, you can talk to the chief inspector. If the problem is not resolved, you can step outside the polling place and call: \_\_\_\_\_

Did you conduct an Initial Check of Polling Area? Y N (Note unusual conditions on back of this page)

**VOTER ACCESS CHECK LIST (Skip Questions that Do not Apply)**

Is polling place accessible for disabled?	Yes	No
Are voting machines accessible for disabled voters?	Yes	No
Are all machines set up so that voter is assured of privacy?	Yes	No
Are all poll watchers and Voter Registrar/Inspector are Present?	Yes	No
Are the table(s) for checking-in and tables for voting clearly marked and separated?	Yes	No
Is registration(checking-in) in the same room as voting?	Yes	No
Are you given a place to start that is between 6 and 12 feet from the poll workers? Can you hear?	Yes	No
Is there signage showing the ward/district boundaries?	Yes	No
Did they find your name in the book?	Yes	No
Did they check your ID?	Yes	No
Is there a vote counter on the voting machine? (To check the count, before and after each vote) What was the number before? _____	Yes	No
Did you cast a vote?	Y	N
Did vote counter increase total number of votes by `1` vote after voting? What #? _____	Y	N
Did you experience any technical difficulties with the voting machine?	Y	N
<b>Was anyone turned away and not allowed to vote?</b>	Y	N
<b>Did anyone turned away request provisional/challenge ballot?</b>	Y	N
<b>Did anyone who requested challenge ballot get their request denied?</b>	Y	N
<b>Did anyone who requested challenge ballot and was denied, seek to submit a hand-written affidavit and receive a receipt of their affidavit?</b>	Y	N
<b>Did anyone who sought to submit an affidavit and get a receipt for it, get their request denied?</b>	Y	N

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Was anyone who sought assistance from you, or anyone who assisted such a person, treated improperly?	Y	N
Did you write down the name of the Poll Worker? Were names denied? YOUR POLL WORKER: _____	Y	N
Did you write down the name of the Chief Polling Inspector/Coordinator? YOUR Chief Polling Inspector: _____	Y	N

After voting is over, please tally up the reasons why people you met did not vote. :

**Reason A: Did not meet deadline for changing party affiliation**

**Reason B: Did not have drivers license or state ID with them, or doesn't own one**

**Reason C: Did not have documents showing residency**

**Reason D: Confused by instructions mailed to them/told to them by Board of Elections**

**Reason E: Thier proper and timely registration was purged with or without notice**

**Reason F: other (explain)**

For each of the below cases, get name, address, phone number, view ID if available, list on back

Reason	Number of People (Tally each complaint by using hash marks. For example 3 people is "lll")	Details
(Reason A)		
(Reason B)		
(Reason C)		
(Reason D)		
(Reason E)		
(Reason F)		

Try to capture/list all of the reasons and the outcomes for those not able to vote. Count with hashmarks on the above table and collect/denote details, including time of day, and note on the back of this form. Remember to go outside and ask the telephone number of a voter who was not allowed to vote, the reason given, and the voter's response. (Upon completion, please cc a copy to the below email address)