Voting System Post-Election Audit Report

County: Duval **Date of Election:** 11/08/2022

Type of Audit (check applicable box): ☐ Manual ☐ Automated Independent

Precinct Number(s): _____

Race (if Manual Audit): _____

1. Overall accuracy of the audit:

2. Description of any problems or discrepancies encountered:

3. Likely cause of such problems or discrepancies:

4. Recommended corrective action with respect to avoiding or mitigating such circumstances in future elections:

Check applicable box and sign below:

☐ We hereby certify that the report of the voting system audit performed for the election is accurate and that attached are precinct summary reports for each precinct audited.

X We hereby certify that a voting system audit was not done because a manual recount was conducted under s. 102.166, Florida Statutes.

Signatures of County Canvassing Board members:

Printed Name	Signature	Date
Roberto Arias		11/18/2022
Michael Boylan		11/18/2022
Mike Hogan		11/18/2022