

Date			Teller Committee, This Form:		
Title of Event					
Title of Race					
Number of Credentialed Voters		Number of Ballots Cast This Race			
(Total Ineligible Ballots. Do Not Include in Total Cast or Counted. Record # Ineligible After Team Name. _____)					
Candidate Name	(Candidate Name 1)	(Candidate Name 2)	(Candidate Name 3)	(Candidate Name 4)	(Candidate Name 5)
Team A					
Team B					
Team C					
Team D					
Team E					
Team F					
Team G					
Team H					
Team I					
Team J					
CANDIDATE TOTAL					
Candidate Totals	Total/ Percentage/ Place	Total/ Percentage/ Place	Total/ Percentage/ Place	Total/ Percentage/ Place	Total/ Percentage/ Place
Candidate Name	(Candidate Name 6)	(Candidate Name 7)	(Candidate Name 8)	(Candidate Name 9)	(Candidate Name 10)
Team A					
Team B					
Team C					
Team D					
Team E					
Team F					
Team G					
Team H					
Team I					
Team J					
CANDIDATE TOTAL					
Candidate Totals	Total/ Percentage/ Place	Total/ Percentage/ Place	Total/ Percentage/ Place	Total/ Percentage/ Place	Total/ Percentage/ Place