## **Voting System Post-Election Audit Report**

County: Marion/City of Ocala	Date of Election:	09/19/2023	
Type of Audit (check applicable box)		Automated Inde	ependent
Precinct Number(s): 0003			
Race (if Manual Audit): City Counci	I District 2		***************************************
1. Overall accuracy of the audit:			
100 70			
2. Description of any problems or	discrepancies encoun	tered:	
NA			
3. Likely cause of such problems of	or discrepancies:		
4. Recommended corrective action circumstances in future election	•	ling or mitigating su	ch
Check applicable box and sign below	:		
We hereby certify that the report of accurate and that attached are precinct	f the voting system au	•	
☐ We hereby certify that a voting system conducted under s. 102.166, Florida State		ne because a manual	recount was
Signatures of County Canvassing Board	d members:		
Wesley Wilcox	/ July /	liles	09/22/2023
	gnature	1	Date
Angel Jacobs /	muel All	200	09/22/2023
	gnature	)	Date
Jared Gainey	for To	<b>5</b>	09/22/2023
Printed Name Si	gnature		Date