

Appendix 5: Master Checklist

The purpose of the master checklist is to provide the person (or persons) supervising the ballot proofing with a means to verify the process was completed. Use this to create your own to ensure no key steps are missed.

✓	Task
<input type="checkbox"/>	Proofing materials prepared and proofing checklists finalized
<input type="checkbox"/>	Proofing training conducted
<input type="checkbox"/>	Districts by ballot style reviewed for accuracy
<input type="checkbox"/>	Candidate and office spreadsheet used during import reviewed for accuracy against source material
<input type="checkbox"/>	Initial ballot proofing assigned to: [Insert Staff] <ul style="list-style-type: none"> <input type="checkbox"/> Started on: [Insert Date] <input type="checkbox"/> Completed on: [Insert Date] <input type="checkbox"/> Corrections Required: (circle one) Yes No <input type="checkbox"/> Revisions made by: [Insert Staff] <input type="checkbox"/> New Proofs Made: [Insert Date]
<input type="checkbox"/>	Second ballot proofing assigned to: [Insert Staff] <ul style="list-style-type: none"> <input type="checkbox"/> Started on: [Insert Date] <input type="checkbox"/> Completed on: [Insert Date] <input type="checkbox"/> Corrections Required: (circle one) Yes No <input type="checkbox"/> Revisions made by: [Insert Staff] <input type="checkbox"/> New Proofs Made: [Insert Date]
<input type="checkbox"/>	Third ballot proofing assigned to: [Insert Staff] <ul style="list-style-type: none"> <input type="checkbox"/> Started on: [Insert Date] <input type="checkbox"/> Completed on: [Insert Date] <input type="checkbox"/> Corrections Required: (circle one) Yes No <input type="checkbox"/> Revisions made by: [Insert Staff] <input type="checkbox"/> New Proofs Made: [Insert Date]

✓	Task
<input type="checkbox"/>	Political parties provided proof on: [Insert Date] <ul style="list-style-type: none"> <input type="checkbox"/> Review of proof acknowledged on: [Insert Date] <input type="checkbox"/> Corrections Required: (circle one) Yes No
<input type="checkbox"/>	Subdivisions/Municipalities provided proof on: [Insert Date] <ul style="list-style-type: none"> <input type="checkbox"/> Review of proof acknowledged on: [Insert Date] <input type="checkbox"/> Corrections Required: (circle one) Yes No
<input type="checkbox"/>	Issue Groups provided proof on: [Insert Date] <ul style="list-style-type: none"> <input type="checkbox"/> Review of proof acknowledged on: [Insert Date] <input type="checkbox"/> Corrections Required: (circle one) Yes No
<input type="checkbox"/>	Candidates provided proof on: [Insert Date] <ul style="list-style-type: none"> <input type="checkbox"/> Review of proof acknowledged on: [Insert Date] <input type="checkbox"/> Corrections Required: (circle one) Yes No
<input type="checkbox"/>	Most populous entity in district provided proof on: [Insert Date] <ul style="list-style-type: none"> <input type="checkbox"/> Review of proof acknowledged on: [Insert Date] <input type="checkbox"/> Corrections Required: (circle one) Yes No
<input type="checkbox"/>	Ballot proof reviewed by Director on: [Insert Date]
<input type="checkbox"/>	Final ballot layout and proof reviewed by Director on: [Insert Date]