

Schedule G – Voting Systems Purchase Order

State of Ohio – Statewide Voting Systems Project

County Authorization for Purchase

The County agrees to be bound by all of the terms of the Voting Systems Agreement.

Authorized

Signature:

Name:

Title:

Date:

_____	_____
_____	_____
_____	_____
_____	_____

Schedule G – Voting Systems Purchase Order

State of Ohio – Statewide Voting Systems Project

Completion of this form signifies the intent to purchase the voting systems listed below.

Note: Refer to the related Implementation Schedule (Schedule D) for implementation dates.

PO Number: _____	<u>County Contact Info.</u>
Contract No.: _____	Name: _____
Vendor: _____	Phone: _____
County: _____	Email: _____
Delivery Address 1: _____	Address: _____
Delivery Address 2: _____	Delivery Restriction Dates/Times: _____

Voting Units

No. of Items	Equipment Type ¹	Unit Cost	Total Cost

Such as DRE, ADA, JBC, Card Writer, Smart Card, PEB, Optical Scan, Software Delivery, Training, etc.

Authorized Signatures

Signature: _____

Name: _____

Title: Director of Election Reform Chief Financial Officer (CFO)

Date: _____