

Wisconsin Election Observer Log

Today's Date: _

Election Date: _

Municipality: _

Page Number: _

Site: Polling place, ward # _

Clerk's office

Central count location

Residential Care Facility or Retirement Home

Other (specify) _

With their signatures below, the signees attest to the following statement:

“I understand Wisconsin’s rules for election observers, as set out in *Wisconsin Election Observers Rules-at-a-Glance*, and agree to abide by those rules while observing this election or election administration event.”

Printed Name	Signature	Street Address	Municipality, State	Representing	Photo ID Verified
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