



★ VIRGINIA ★
DEPARTMENT of ELECTIONS

WRITE-INS CERTIFICATION
VA. CODE § 24.2-675

Complete this form ONLY if (i) the total number of write-ins is 10% or more of the total number of votes cast for the office (for a cross-jurisdictional office, the total number across all jurisdictions), OR (ii) a write-in candidate was elected to the office.

Locality Election Date (MM/DD/YY) General Special Primary
Circle Election Type(s)
Office District (if applicable) Page 1 of

WRITE-INS – SUMMARY

1. Invalid Write-Ins Total Votes Received (In Figures) Enter Total Invalid
2. Valid Write-Ins Enter Total Valid
3. Total Write-Ins Add Lines 1 and 2
[“Total Write-Ins” must match the “Total Write-In Votes” line on the Abstract for this office.]

VALID WRITE-INS – DETAIL

List valid write-ins in alphabetical order below and on continuation pages, as needed. All valid write-ins when added together must equal total entered on line 2 above.

Total Valid Votes Received (In Figures)

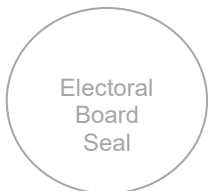
Three horizontal lines for listing valid write-ins.

Continued on pages 2 through

We, the undersigned Electoral Board members, upon examination of the official records deposited with the Clerk of the Circuit Court of the election held on / / , do hereby certify that, with the continuation pages indicated, the above is a true and correct certification of the write-in votes cast at said election for the office indicated above.

Given under our hands this day of ,

A copy test:



_____, Chairman
_____, Vice Chairman
_____, Secretary/Acting
_____, Secretary (Certified Copy)

