

## Observer Question and Comment Form

Date/Time: \_\_\_\_\_

Observer Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email: \_\_\_\_\_

Question or Comment:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Election Staff Contacted: \_\_\_\_\_

Status:  
Resolved

Further Action Needed

**Election Staff Only**

Form Received: \_\_\_\_\_

By: \_\_\_\_\_

Reponse Method: \_\_\_\_\_