

CERTIFICATION OF ELECTION RESULTS
_____ CONSERVATION DISTRICT

<u>Nominees</u>	<u>Vote Count</u>
1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____
5. _____	_____
6. _____	_____
7. _____	_____

(Use additional sheets, if necessary)



I hereby certify that the above is a full, correct and true account of the ballots issued and voted in the election held on (date) _____ at (address) _____, (County) _____ County, State of Nevada, and the winners are declared to be:

Name: _____ Address: _____
Phone: _____ Email: _____

These winners will replace the following on the Board of Supervisors:

Name: _____ Name: _____

Name: _____ Name: _____

Name: _____



All new supervisors will serve four-year terms, commencing on January _____, 20____ (1st Monday in January) and terminating on December 31, of 20_____.

Signed: _____
County Registrar/County Clerk/Designee/or District Chairman

Please submit election results within 7 days from the date of the election to:
DCNR - CONSERVATION DISTRICT PROGRAM
BRE@DCNR.NV.GOV
Fax# 775-684-2715

****Mail a copy to the County Clerk & Recorder**

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