



11208 John Galt Boulevard - Omaha, NE 68137 USA  
Phone: 402.593.0101 - Toll-Free: 1.800.247.8683 - Fax: 402.593.8107  
www.essvote.com

July 17, 2006

Ms. Anna E. Svizzero  
State Board of Elections  
40 Steuben Street  
Albany NY, 12207

Dear Ms. Svizzero,

Enclosed, is the original AFFIDAVIT requested by the State of New York to complete the application for Certification. The AFFIDAVIT has been signed by Aldo J. Tesi President and Chief Executive Officer of Election Systems & Software.

If there is anything else that you require from ES&S or myself please let me know.

Sincerely,

A handwritten signature in cursive script that reads 'Rich Bernstein'.

Rich Bernstein  
cc: Pearson, Steve, Kerrigan, Kevin

NEW YORK STATE BOARD OF ELECTIONS  
ELECTION OPERATIONS UNIT  
40 STEUBEN STREET  
ALBANY, NEW YORK 12207-2109

APPLICATION FOR CERTIFICATION OF VOTING SYSTEM

NAME OF VENDOR Election Systems and Software CONTACT PERSON Rich Bernstein  
ADDRESS OF COMPANY 11208 John Galt Boulevard  
TELEPHONE NUMBER 402-938-1477 FAX NUMBER 402-970-1275 EMAIL rsbernstein@essvote.com Mobile 402-201-6690  
FEDERAL TAX IDENTIFICATION NUMBER 47-0617567

DESCRIPTION OF VOTING SYSTEM

Unity 2.5.0.3 Election Management System, with the iVotronic LS Direct Recording Electronic (DRE) Touch Screen voting system

VOTING SYSTEM HARDWARE INFORMATION

TYPE OF SYSTEM

DIRECT RECORD ELECTRONIC  PRECINCT O/S  ABSENTEE  OTHER \_\_\_\_\_  
MODIFICATION TO AN EXISTING NYS CERTIFIED SYSTEM  YES  NO IF YES, CHECK APPROPRIATE BOX BELOW  
 MODIFICATION TO HARDWARE  MODIFICATION TO SOFTWARE  MODIFICATION TO HARDWARE AND SOFTWARE  
NAME OF SYSTEM iVotronic LS 2.0 MODEL NUMBER NA \_\_\_\_\_  
LIST ALL AUXILIARY COMPONENTS \_\_\_\_\_

FIRMWARE AND SOFTWARE RELEASE INFORMATION

IF YOU CHECKED YES TO MODIFICATION TO SOFTWARE ABOVE PLEASE ENTER BOTH THE CURRENT CERTIFIED RELEASE # AND THE MODIFIED RELEASE # BELOW

FIRMWARE RELEASE # (DRE) 2.0.0.0  
EMS BALLOT DEFINITION SOFTWARE RELEASE # EDM Version 7.3.0.3  
EMS ACCUMULATION SOFTWARE RELEASE # ERM Version 7.0.2.0  
IS SYSTEM FEDERALLY QUALIFIED? QUALIFICATION # NO

GENERAL INFORMATION

DO YOU OWN ALL RIGHTS TO THIS EQUIPMENT?  YES  NO  
IF NO, EXPLAIN \_\_\_\_\_

0065 JUN 10 15

NEW YORK STATE BOARD OF ELECTIONS

TYPE OF BUSINESS\ORGANIZATION:

CORPORATION       PARTNERSHIP       INDIVIDUAL

IF A CORPORATION:

STATE OF INCORPORATION \_\_\_\_\_

AUTHORIZED TO DO BUSINESS IN N.Y.S.?     YES       NO

MAINTAIN OFFICE IN N.Y.S.?                 YES       NO

INDEPENDENTLY OWNED?                     YES       NO

IF NO, NAME AND ADDRESS OF PARENT COMPANY \_\_\_\_\_

IS ANY PART OF THE SYSTEM MANUFACTURED OR ASSEMBLED BY ANOTHER COMPANY?     YES       NO

IF YES, NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

**VOTING SYSTEM HISTORY INFORMATION**

ALL JURISDICTIONS WHERE PRESENTLY CERTIFIED

ALL JURISDICTIONS WHERE SYSTEM HAS BEEN USED

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2006 JUL - 3 AM 10:15

NEW YORK STATE  
BOARD OF ELECTIONS  
ALBANY, NEW YORK

APPLICATION REQUIREMENTS

A check made payable to the State Board of Elections in the amount of \$5,000.00 which shall be placed in the State Special Revenue Account. Notice shall be provided to vendor when additional funds are required to be deposited.

Three copies of the operating or instruction manuals pertaining to the voting system are to be included with the completed application.

No application shall be deemed to be filed until all documentation, required under §§6209.4 and 6209.5 of the Rules and Regulations of the State Board have been submitted to such Board or its designee.

ATTESTATIONS

I HEREBY AGREE TO PROVIDE THE VOTING SYSTEM AND TO FURNISH ALL DOCUMENTATION REQUIRED BY PART 6209 OFFICIAL COMPILATION OF CODES, RULES AND REGULATIONS OF THE STATE BOARD OF ELECTIONS OR ITS DESIGNEE UPON DEMAND AND FURTHER AGREE TO REIMBURSE THE STATE BOARD FOR THE COST OF EXAMINATION WITHIN THIRTY ( 30 ) DAYS OF RECEIPT OF NOTIFICATION OF SUCH COST. I UNDERSTAND THAT I MAY BE REQUIRED TO PLACE THE VOTING SYSTEM IN THE STATE BOARD'S POSSESSION FOR AS LONG AS SUCH SYSTEM IS IN USE IN NEW YORK STATE.

I HEREBY ACKNOWLEDGE THAT I HAVE READ AND UNDERSTAND MY OBLIGATIONS UNDER §6209.4 (I), REQUIRING DISCLOSURE OF FINANCIAL CONTRIBUTIONS MADE BY ANY OFFICER, CONTROLLING SHARE HOLDER OR THE VENDOR WITHIN THE UNITED STATES OF AMERICA TO ANY POLITICAL PARTY OR CANDIDATE WITHIN 2 YEARS OF SUBMISSION OF THIS APPLICATION, AND HAVE PROVIDED THE SAME.

I HEREBY ACKNOWLEDGE THAT I HAVE READ AND UNDERSTAND MY OBLIGATIONS UNDER §6209.5 (G), REQUIRING DISCLOSURE OF ANY PECUNIARY INTEREST IN OR ANY DIRECT OR INDIRECT CONTROL OVER ANY TESTING LABORATORY WHICH MAY BE USED IN CONNECTION WITH THE CERTIFICATION OF THIS VOTING SYSTEM.

SIGNATURE OF APPLICANT *Rick Bernstein* DATE *6/30/06*  
TITLE *State Certification Manager*

2006 JUL 16 3:01 PM  
STATE BOARD OF ELECTIONS  
STATE OF NEW YORK

