

NEW YORK STATE BOARD OF ELECTIONS
ELECTION OPERATIONS UNIT – ATTN: TARRY A. BREADS
40 STEUBEN STREET
ALBANY, NEW YORK 12207

APPLICATION FOR MODIFICATION OF CERTIFIED VOTING SYSTEM

NAME OF VENDOR: Sequoia Voting Systems
CONTACT PERSON: Sandy Green, Director of Certification
ADDRESS OF COMPANY: 717 17th St., Suite 310, Denver, CO 80202
TELEPHONE NUMBER: 303-446-8683 FAX NUMBER: 303-446-3047
E-MAIL ADDRESS: sgreen@sequoiavote.com CELL PHONE: 303-775-3334
FEDERAL TAX ID NUMBER: ██████████

VOTING SYSTEM MODIFICATION INFORMATION

NAME OF SYSTEM: Democracy™ Suite (EMS Core System, Application Server, Database Server, Election Event Designer, Results, Tally & Release, Results Publishing Module, Democracy Suite Hardware), ImageCast™ Precinct Ballot Imager with ADA module.

MODEL NUMBER: 2.1

CHECK ALL THAT APPLY BELOW AND PROVIDE A DESCRIPTION OF EACH MODIFICATION:

- MODIFICATION TO HARDWARE
- MODIFICATION TO SOFTWARE
- MODIFICATION TO FIRMWARE

DESCRIPTION OF MODIFICATION & RELEASE NUMBER FOR EACH:

- Hardware

Minor mechanical change to cover inoperable (no modem present) RJ11 connector port on the ImageCast unit and remove the RJ11 connector from the motherboard. In order to avoid confusion of users, the design for NY will be improved by removing any component associated with the optional modem. In this case, that would entail removing the RJ11 connector from the motherboard, and leaving the port hole sealed with metal. These two changes are the modifications requested.

DATE VOTING SYSTEM MODIFICATION AND CHANGE CONTROL DOCUMENTATION WILL BE DELIVERED TO THE NEW YORK STATE BOARD OF ELECTIONS FOR EXAMINATION: Immediately upon request of the Board.

DATE OF MODIFICATION APPLICATION: 04/25/08

SIGNATURE OF APPLICANT: Howard Cramer

TITLE: Vice President of Sales

<p><u>SBOE USE ONLY</u></p> <p>MODIFICATION #</p>
