

ALABAMA STATE CAPITOL
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JOHN H. MERRILL
SECRETARY OF STATE

APPLICATION FOR ELECTION EXPENSE FUNDING RELATED TO COVID-19

County Information

County Name: Autauga County

Mailing Address:
(Address where check will
be mailed) Autauga County Commission
135 North Court Street Suite B
Prattville, Alabama 36067

Name of Primary Contact: Regina Mims

Direct Telephone Number: 334.358.6703

Email: Regina.mims@autauga.com

Name of Secondary Contact: Danielle Gantt

Direct Telephone Number: 334.361.3728 (option 4)

Email: Danielle.gantt@autauga.com

Approved: *J. H. Merrill*
\$14,989.⁹⁰
6/25/20

RECEIVED

JUN 15 2020

ALABAMA
SECRETARY OF STATE

Items Requested for Funding

Please complete this section indicating the items or services you will purchase or fund with the COVID-19 pandemic response expenditures. In order to be eligible to receive funds, you must complete all areas in this section. You must attach a quote or invoice for the items requested.

| Items or Services to be Purchased or Funded with Concise Description | Cost of Items (Must attach quote or invoice) | Reason for Purchase/Funding |
|--|--|--|
| <p>Sneeze shields for poll workers</p> <p style="text-align: center;">APPROVED</p> <p>BY: _____ DATE: _____</p> | <p>68.16 x 60 4089.60</p> | <p>Protect poll worker working poll pad location</p> |
| <p>Gloves</p> <p style="text-align: center;">APPROVED</p> <p>BY: _____ DATE: _____</p> | <p>36 boxes at 9.50 box 342.00</p> | <p>Gloves will be used by the poll workers as personal protective equipment</p> |
| <p>N95 Masks</p> <p style="text-align: center;">APPROVED</p> <p>BY: _____ DATE: _____</p> | <p>.95 each 36 masks 34.20</p> | <p>Masks to be used by close contact poll worker</p> |
| <p>paper towels</p> <p style="text-align: center;">APPROVED</p> <p>BY: _____ DATE: _____</p> | <p>50.45 per case 4 cases 201.80</p> | <p>Paper towels will be used to clean area and to cover finger to operate poll pad</p> |
| TOTAL: | | |

Please provide details for each non-repeating item for which you are seeking funding.
Make additional pages, if necessary.

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|---|---|--|
| Large Gallon Bottle of Hand Sanitizer APPROVED BY: _____ DATE: _____ | 10 One Gallon 45.00 each 450.00 | Cleaning Polling Places (before and after) |
| Spray Bottles for Disinfectant APPROVED BY: _____ DATE: _____ | 32 oz Spray Bottle 1.50 each 10 15.00 & 10 trigger Sprayer at 2.79 27.90 42.90 total | Cleaning Polling Places (before and after) |
| Hospital Face Masks 18 boxes 1 box per site APPROVED BY: _____ DATE: _____ | 18 boxes of 50 at 75.00 1350.00 total | |
| 30 boxes of Alcohol prep pads 200 pads per box 2 boxes per site APPROVED BY: _____ DATE: _____ | 2.90 per box 30 boxes 104.40 | Alcohol prep pads will be used to clean the screens of the poll pads |
| TOTAL: | | |

Please provide details for each non-repeating item for which you are seeking funding. Make additional pages, if necessary.

Total Request & Certification

Total Amount of Funding Request
~~\$ 16,888.04~~

amended amt: 14,989.90 ✓

I, Joe Sedinger in my capacity as Sheriff of Autauga County, submit this application for Election Expense Funding related to COVID-19.
(Sheriff shall sign this certification if any requested funding is applicable to the Sheriff)

I, Kimberly G. Kervin Kimberly G. Kervin in my capacity as the Judge of Probate of Autauga County, submit this application for Election Expense Funding related to COVID-19.
(Judge of Probate shall sign this certification if any requested funding is applicable to the Judge of Probate)

I, Beth George Beth George in my capacity as the Absentee Election Manager of Autauga County, submit this application for Election Expense Funding related to COVID-19.
(Absentee Election Manager shall sign this certification if any requested funding is applicable to the Absentee Election Manager)

I, Jay Thompson in my capacity as Chair/President of Autauga County Commission, submit this application for Election Expense Funding related to COVID-19 for the aforesaid county.

By signing this application, I certify that all information contained herein is accurate and complete to the best of my knowledge, that all state purchasing and/or bid laws and/or local purchasing regulations have been strictly followed related to the proposed purchase(s), that the amount for which I am seeking funding will be spent only on items or services in this application and that no individual or company for which funding will be spent has been suspended or debarred from access to federal funds.

I acknowledge that any misrepresentation of truth or accuracy may require that all grant monies awarded to the county be returned to the Alabama Secretary of State's Office or the United States Election Assistance Commission and that any other penalties provided by Federal and State law may apply.

Name of County: Autauga
Signature of Chair/President of the County Commission: [Signature] / Jay Thompson
Date: 5-20-2020

SWORN AND SUBSCRIBED before me on this 20th day of May, 2020.
MY COMMISSION EXPIRES the 21st day of February, 2024.

(SEAL) Andrew H. Smith
SIGNATURE OF NOTARY PUBLIC

(NOTARIZATION REQUIRED ONLY FOR CHAIR/PRESIDENT OF COUNTY COMMISSION)