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JOHN H. MERRILL
SECRETARY OF STATE

APPLICATION FOR ELECTION EXPENSE FUNDING RELATED TO COVID-19

County Information

County Name: DeKalb County

Mailing Address: 111 Grand Avenue, SW
(Address where check will Fort Payne, AL 35967
be mailed)

Name of Primary Contact: Matt G. Sharp

Direct Telephone Number: 256-845-8500

Email: msharp@dekalbcountyal.us

Name of Secondary Contact: Wendy Bobbitt

Direct Telephone Number: 256-845-8500

Email: wbobbitt@dckalbcountyal.us

*Approved: \$11,300.00
J. H. Merrill
6/22/20*

ALABAMA
SECRETARY OF STATE

JUN 11 2020

RECEIVED

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>N. Todd Greeson, Circuit Clerk Absentee Election Manager Compensation</p> <p>APPROVED</p> <p>BY: _____ DATE: _____</p>	<p>\$5,750</p>	<p>Payment for Absentee Election Manager for days worked between March 4, 2020 and May 19, 2020</p>
<p>Election workers \$25 Supplement for duly appointed pollworkers</p> <p>APPROVED</p> <p>BY: _____ DATE: _____</p>	<p>\$5,550</p>	<p>Attached are the names of the duly appointed pollworkers for the July 14, 2020 Primary Run-Off in DeKalb County subject to the additional \$25 supplemental pay</p>
TOTAL:	<p>\$11,300.00 ✓</p>	

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	
\$	11,300.00 ✓

I, Nick Welden, in my capacity as Sheriff of DeKalb 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, Ronnie Osborn, in my capacity as the Judge of Probate of DeKalb 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, Nathan Todd Gresson, in my capacity as the Absentee Election Manager of DeKalb 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, Ricky Harcrow, in my capacity as Chair/President of the DeKalb 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: DeKalb
 Signature of Chair/President of the County Commission: [Signature]
 Date: June 10, 2020

SWORN AND SUBSCRIBED before me on this 10th day of JUNE, 2020.
 MY COMMISSION EXPIRES the 17th day of January, 2023.
 (SEAL) [Signature]
 SIGNATURE OF NOTARY PUBLIC

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