ALABAMA STATE CAPITOL 600 DEXTER AVENUE SUITE S-105 MONTGOMERY, AL 36130



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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: (Address where check will be mailed)	111 Grand Avenue, SW Fort Payne, AL 35967
Name of Primary Contact:	Matt G. Sharp
Direct Telephone Number: Email:	256-845-8500 msharp@dekalbcountyal.us
Name of Secondary Contact: Direct Telephone Number: Email:	Wendy Bobbitt 256-845-8500 wbobbitt@dekalbcountyal.us

Approbl: 1/300.00 X.W. Menill Weel son

SECRETARY OF STATE

JUN 11 2020

RECEIVED

Items Requested for Funding

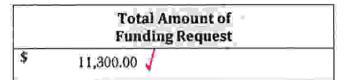
Please complete this section indicating the items or services you will purchase or fund with the COVID-19 pandemic response expenditures. In order to be eligible to receive funds, you must complete all areas in this section. You must attach a quote or invoice for the items requested.

Items or Services to be Purchased or Funded with Concise Description	Cost of Items (Must attach quote or invoice)	Reason for Purchase/Funding
N. Todd Greeson, Circuit Clerk Absentee Election Manager Compensation APPROVED 6Y	\$5,750	Payment for Absentee Election Manager for days worked between March 4, 2020 and May 19, 2020
Election workers \$25 Supplement for duly appointed pollworkers APPROVED BY:	\$5,350	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
TOTAL:	\$11,300.00 🎺 📑	

Please provide details for each non-repeating item for which you are seeking funding.

Make additional pages, if necessary.

Total Request & Certification



l Nick Welden	in my capacity as Sheriff of	DeKalb County, subm
this application for Election Expense Fu		
(Sheriff shall sign th	nis certification if any requested funding	Is applicable to the Sheriff)
t, Ronnie Osborn	, in my capacity as the Judge of F	
County, submit this application for Electi	on Expense Funding related to COVID-1	9. —
(Judge of Probate shall sign ti	nis certification if any requested funding	is applicable to the Judge of Probate)
i, Nathan Todd Greeson DeKalb Cou	, in my capacity as the Absentee	
	nty, submit this application for Election	Expense running related to GOVID-19.
(Absentee Election Manager shall s	ign this certification If any requested fur Manager)	iding is applicable to the Absentee Election
	8-7	
Ricky Harcrow	in my capacity as Chair/Presid	ent of the DeKalb
County Commission, submit this applica		ed to COVID-19 for the aforesaid county.
the proposed purchase(s), that the amo	l/or bid laws and/or local purchasing re ount for which I am seeking funding	gulations have been strictly followed related to will be spent only on items or services in this has been suspended or debarred from access t
	ate's Office or the United States Election	at all grant monies awarded to the county be Assistance Commission and that any other
Name of County:	DeKalb	
Signature of Chair/President of the County Commission:	June 10, 2020	
Date:	Millian	
unit E	RA KEANING	
SWORN AND SUBSCRII	BED before meon this 10 ^{+h} day	of JUNE 2020.
MY COMMISSION EXPL	PUBLIC OF day of Janu	2023
(SEAL) SIQNA	TIANE DE NOTARY PUBLIC	
(JEAL) SIMP	Auto office turk copric	

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