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JOHN H. MERRILL
SECRETARY OF STATE

APPLICATION FOR ELECTION EXPENSE FUNDING RELATED TO COVID-19

County Information

County Name:

Louise

Mailing Address:

(Address where check will be mailed)

PO Box 105
Hayneville, AL 36040

Name of Primary Contact:

Jacquelyn Thomas

Direct Telephone Number:

334-548-2331

Email:

jthomas@htenet.net

Name of Secondary Contact:

Lashandra Myrick

Direct Telephone Number:

334-315-0787

Email:

probate2365@htenet.net

Approved:

\$ 11,796.13

J. H. Merrill

6/25/2020

RECEIVED

JUN 12 2020

JB

ALABAMA
SECRETARY OF STATE

Total Request & Certification

	Total Amount of Funding Request
\$	11,968.13

+ 1,796.15 ✓
[Signature]

I, Christopher S. Vest, in my capacity as Sheriff of Louisa 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, Rubina G. [Signature], in my capacity as the Judge of Probate of Louisa 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, Johnnie M. King, in my capacity as the Absentee Election Manager of Louisa 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, Charnell McAline, in my capacity as Chair/President of Louisa 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: Louisa
Signature of Chair/President of the County Commission: Charnell McAline
Date: 6/12/20

SWORN AND SUBSCRIBED before me on this 12th day of June, 2020.
MY COMMISSION EXPIRES the 19th day of September, 2023

(SEAL) [Signature]
SIGNATURE OF NOTARY PUBLIC

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