APPLICATION FOR ELECTION EXPENSE FUNDING RELATED TO COVID-19

County Information

County Name: PERRY COUNTY

Mailing Address:
P.O. BOX 478
Marion, Alabama 36756

Name of Primary Contact: CEDRIC HUDSON - CHAIRMAN
Direct Telephone Number: (334) 683-2200 / (334) 410-0519
Email: commissionerhudson@gmail.com

Name of Secondary Contact: TAMARA KENNIE
Direct Telephone Number: (334) 683-2200 ext 1 234-323
Email: kenniepcc53@gmail.com

Received: JUN 10 2020

JOHN H. MERRILL
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.

<table>
<thead>
<tr>
<th>Items or Services to be Purchased or Funded with Concise Description</th>
<th>Cost of Items (Must attach quote or invoice)</th>
<th>Reason for Purchase/Funding</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hand Sanitizer 24/8oz Bottles</td>
<td>$311.04</td>
<td>Personal Protection Equipment (PPE)</td>
</tr>
<tr>
<td>Hand Sanitizer 8 gallons</td>
<td>$250.00</td>
<td>PPE</td>
</tr>
<tr>
<td>1 Pump for Gallon sanitizer</td>
<td>$8.50</td>
<td>PPE</td>
</tr>
<tr>
<td>64 spray bottles</td>
<td>$160.00</td>
<td>PPE (to fill with sanitizer from gallon jugs)</td>
</tr>
<tr>
<td>54 pkg KN95 Masks (6 in each pkg)</td>
<td>$297.00</td>
<td>PPE</td>
</tr>
<tr>
<td>Gloves (10 cases of 100)</td>
<td>$59.00</td>
<td>PPE</td>
</tr>
<tr>
<td><strong>APPROVED</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>BY:</strong> date:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>300 Alcohol Wipes (10 per pack)</td>
<td>$480.00</td>
<td>Cleaning and Sanitation</td>
</tr>
<tr>
<td>Lysol Disinfectant (1 case)</td>
<td>$78.91</td>
<td>Cleaning and Sanitation</td>
</tr>
<tr>
<td>Steriphene II Disinfectant (1 cs)</td>
<td>$142.44</td>
<td>Cleaning and Sanitation</td>
</tr>
<tr>
<td>Clorox Bleach (1 case)</td>
<td>$88.00</td>
<td>Cleaning and Sanitation</td>
</tr>
<tr>
<td>Clorox Total 360 Electrostatic Sprayer</td>
<td>$5,333.29</td>
<td>Cleaning and Sanitation - this will provide a long-term solution to disinfecting and sanitizing all of the polling places. We formerly contracted with Servepro but they are no longer in our area and other locations are booked or cannot come on a regular basis.</td>
</tr>
<tr>
<td><strong>APPROVED</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>BY:</strong> date:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Absentee Election Manager reimbursement from (3/4/2020 to May 19, 2020)</td>
<td>$3,250.00</td>
<td>Allowable Reimbursable Exp by SOS</td>
</tr>
<tr>
<td>Supplemental Pay (Poll Workers) $25.00 each</td>
<td>$1,800</td>
<td>Allowable Reimbursable Exp by SOS</td>
</tr>
<tr>
<td><strong>APPROVED</strong></td>
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<td></td>
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<tr>
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</table>

**TOTAL:** $12,258.18

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

$ 12,258.18 ✔

I, ____________________________________________ in my capacity as Sheriff of ___________________________ 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, Eldora B. Anderson ___________________________ in my capacity as the Judge of Probate of Perry 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, _________________ ___________________________ in my capacity as the Absentee Election Manager of Perry 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, Cedric Hudson ____________________________ in my capacity as Chair/President of Perry 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: Perry

Signature of Chair/President of the County Commission: ____________________________

Date: 6/10/2020

SWORN AND SUBSCRIBED before me on this _____ day of _____, 2020.

MY COMMISSION EXPIRES the _____ day of _____, 2024.

(SEAL) MONICA BRYANT NOTARY PUBLIC

ALABAMA STATE AT LARGE COMM. EXP. 02/19/24

(NOTARIZATION REQUIRED ONLY FOR CHAIR/PRESIDENT OF COUNTY COMMISSION)
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Mailing Address: P.O. BOX 478
Marion, Alabama 36756

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Email: commissionerhudson@gmail.com

Name of Secondary Contact: TAMARA KENNIE
Direct Telephone Number: (334) 683-2200 ext 1
Email: kenniepcc53@gmail.com

Approval + 1585.00
6/20/2020
**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.

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</thead>
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<tr>
<td>2000 3 Ply Masks</td>
<td>$1,985.00</td>
<td>Personal Protection Equipment Probate Judge requested additional masks to be purchased to be distributed to the public upon entering all of the polling places</td>
</tr>
</tbody>
</table>

**APPROVED**

BY: [Signature]
DATE: [Date]

| TOTAL: $1,985.00 |

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

<table>
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<td>$ 1,985.00 ✓</td>
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(Sheriff shall sign this certification if any requested funding is applicable to the Sheriff)

I, ________________, in my capacity as the Judge of Probate of ________________ 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, ________________, in my capacity as the Absentee Election Manager of ________________ 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, Cedric Hudson, in my capacity as Chair/President of ________________ 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.

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Name of County: ________________

Signature of Chair/President of the County Commission: ________________

Date: ________________

SWORN AND SUBSCRIBED before me on this ________________ day of ________________, 2020.

MY COMMISSION EXPIRES the ________________ day of ________________, 2024.

(Seal)

SIGNATURE OF NOTARY PUBLIC

NOTARIZATION REQUIRED ONLY FOR CHAIR/PRESIDENT OF COUNTY COMMISSION

MONICA BRYANT
NOTARY PUBLIC
ALABAMA STATE AT LARGE
COMM. EXP. 02/19/24