

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: Cherokee

Mailing Address: 260 Cedar Bluff Road  
(Address where check will be mailed) Centre, AL  
35960

Name of Primary Contact: Daniel Steele  
Direct Telephone Number: 256-927-3668  
Email: danielsteele@cherokeecounty-al.gov

Name of Secondary Contact: Eric Tucker  
Direct Telephone Number: 256-927-3668  
Email: erictucker@cherokeecounty-al.gov

Approved: \$ 29,016.02  
J. H. Merrill  
10/15/20

RECEIVED  
OCT 1 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
Professional Disinfecting of Poll Places  <div style="text-align: center; color: blue; font-weight: bold; font-size: 1.2em;">APPROVED</div> BY: _____ DATE: _____	\$22,650.00	Pre and Post Election disinfecting of polling places.
1 - DS200 Voting Machine  <div style="text-align: center; color: blue; font-weight: bold; font-size: 1.2em;">APPROVED</div> BY: _____ DATE: _____	\$66.07	Per SOS letter dated August 13, 2020.
Poll Worker Expenses (\$50 x 126)  <div style="text-align: center; color: blue; font-weight: bold; font-size: 1.2em;">APPROVED</div> BY: _____ DATE: _____	\$6,300.00	Per SOS letter dated August 13, 2020.
<b>TOTAL:</b>		\$29,016.07 ✓

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

**Total Request & Certification**

<b>Total Amount of Funding Request</b>
\$ 29,016.07 ✓

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, T.B., in my capacity as the Judge of Probate of Cherokee County 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, Tim Burgess, in my capacity as Chair/President of Cherokee County 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: Cherokee  
Signature of Chair/President of the County Commission: T.B.  
Date: 10-1-2020

SWORN AND SUBSCRIBED before me on this 1<sup>st</sup> day of October, 2020.

MY COMMISSION EXPIRES the 6 day of February, 2022.

(SEAL) [Signature]  
SIGNATURE OF NOTARY PUBLIC

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