

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: GREENE

Mailing Address: P.O. BOX 656
(Address where check will Eutaw, AL 35462
be mailed)

Name of Primary Contact: Brenda Burke
Direct Telephone Number: 205-372-6908
Email: bjburke@greenealabama.org

Name of Secondary Contact: Mac Underwood
Direct Telephone Number: 205-372-6910
Email: munderwood@greenealabama.org

Approved: \$11,100.30
J.H. Merrill
10/19/20

RECEIVED

JH
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
18 Election Managers 55 Poll Workers BY: _____ DATE: _____	50 X 18 = 900.00 \$50 X 55 = \$2750.00	Election Man. for Nov 3 election Poll Workers for Nov 3 election
Temp workers to assist AEM 49 days for 2 workers BY: _____ DATE: _____	\$150.00 x 2 workers \$7350.00	Temp workers to assist AEM
Mask Lysol Wipe Hand sanitizer BY: _____ DATE: _____	\$106.36	PPE Supplies
TOTAL:		
\$11,106.36 ✓		

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	
\$	11,106.36 ✓

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, Bubba M. Wedgmont, in my capacity as the Judge of Probate of Greene 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, Veronica M. Jones, in my capacity as the Absentee Election Manager of Greene 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, Allen Turner, in my capacity as Chair/President of Greene 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: Greene

Signature of Chair/President of the County Commission: Allen Turner Sr.

Date: October 1, 2020

SWORN AND SUBSCRIBED before me on this 1 day of October, 2020.

MY COMMISSION EXPIRES the 7 day of April, 2020.

(SEAL) Rhonda French
SIGNATURE OF NOTARY PUBLIC

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