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JOHN H. MERRILL
SECRETARY OF STATE

APPLICATION FOR ELECTION EXPENSE FUNDING RELATED TO COVID-19

County Information

County Name: BARBOUR COUNTY COMMISSION

Mailing Address: P. O. BOX 398
(Address where check will be mailed) CLAYTON, AL 36016

Name of Primary Contact: Raye Ann Calton, County Administrator

Direct Telephone Number: 334-775-8571

Email: rcalton@barbourcountyclayton.com

Name of Secondary Contact: Susan H. Shorter, Judge of Probate

Direct Telephone Number: 334-687-1533

Email: susanshorter@earthlink.net

Approved.
J.H. Merrill
\$2,032.04
12/7/20

RECEIVED

JB
NOV 23 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
① Elizabeth Gray estimated 46 days \$ 3450 Actual 59 days \$75.00 per day is an additional ② Tina Wade 4 days @ \$75 per day ③ Tracy Green 4 days @ \$75 per day	\$975.00 \$300.00 \$300.00	Requested by Absentee Election Manager <div style="text-align: center;"> APPROVED BY: _____ DATE: _____ APPROVED BY: _____ DATE: _____ APPROVED BY: _____ DATE: _____ </div>
④ Barbara Flurry- Payroll expense 5 hours x \$13.50 ⑤ FICA/Medicaid on \$91.50 Mileage reimbursement	\$91.50 \$7.00 \$109.25	Went to Montgomery to pick up Hand Sanitizer <div style="text-align: center;"> APPROVED BY: _____ DATE: _____ APPROVED BY: _____ DATE: _____ </div>
⑥ Hand Sanitizer purchased from Quill Check# 11455	\$92.06	COVID Sanitizing items for polling places <div style="text-align: center;"> APPROVED BY: _____ DATE: _____ </div>
⑦ Donna Noblett - 3 Bottles alcohol ⑧ Susan Shorter - Alcohol Less: Amount estimated in October Net Difference	\$ 5.89 \$ 1.85 <u>(\$15.00)</u> (\$ 7.26)	Alcohol and Spray Bottles for alcohol <div style="text-align: center;"> APPROVED BY: _____ DATE: _____ APPROVED BY: _____ DATE: _____ </div>
TOTAL:		
\$1,867.55 ✓		

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

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<p>Hand Sanitizer and Surface Wipes- Boosters</p> <p>9 This claim: \$837.00 + previously submitted \$745 = \$1582.00. Estimated was \$1650.00 The difference is (\$68.00)</p>	<p>(\$68.00)</p> <p style="font-size: 1.2em; color: blue; font-weight: bold;">APPROVED</p> <p>BY: _____ DATE: _____</p>	<p>COVID Sanitizing items for polling places</p>
<p>10 Over-estimated Poll Workers on October Claim</p>	<p>(\$300.00)</p> <p style="font-size: 1.2em; color: blue; font-weight: bold;">APPROVED</p> <p>BY: _____ DATE: _____</p>	<p>October claim estimated 125 pollworkers, actual poll workers was 119</p>
<p>11 Less: Overage from March election</p>	<p>(\$82.63)</p> <p style="font-size: 1.2em; color: blue; font-weight: bold;">APPROVED</p> <p>BY: _____ DATE: _____</p>	<p>Amount received for March election was \$82.63 more than actual expenses</p>
<p>12 Disinfectant supplies for Absentee Election Manager Estimated- not needed</p>	<p>(\$50.00)</p> <p style="font-size: 1.2em; color: blue; font-weight: bold;">APPROVED</p> <p>BY: _____ DATE: _____</p>	
TOTAL:	<p>\$(500.63) ✓</p>	

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Make additional pages, if necessary.**

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<p>13 U-Haul Rental (additional amount)</p> <p>The Probate Judge had COVID and was quarantined. She needed to test the voting machines. U-Haul was rented to transport voting machines to Eufaula so that she could test the machines, and to store the machines until election day. This resulted in a larger expense than the normal expense just to transport.</p>	<p>\$467.60</p> <p style="font-size: 1.2em; color: blue; font-weight: bold;">APPROVED</p> <p>BY: _____ DATE: _____</p>	<p>The Probate Judge had COVID, under quarantine and needed to test the voting machines which are stored in the Clayton Courthouse.</p>
<p>14 Travel reimbursement for Shirley Giglio and Donna Noblett.</p> <p>Noblett and Giglio are based in the Eufaula Courthouse. The Probate Judge was under quarantine due to COVID. These 2 employees made numerous trips to Clayton to facilitate the transport of the voting machines from Clayton to Eufaula because the Probate Judge was unable to do so.</p> <p>Round trip mileage from the Eufaula Courthouse to the Clayton Courthouse is 44 miles. Giglio charged 200 miles over a period of 5 days, which would have been at least 220 miles. Noblett charged 143.5 miles over a period of 4 days, which would have been at least 176 miles. This claim is for the mileage actually charged.</p> <p>Giglio 200 miles X .575 = \$115.00 Noblett 143.5 miles x .575 = \$82.52</p>	<p>\$197.52</p> <p style="font-size: 1.2em; color: blue; font-weight: bold;">APPROVED</p> <p>BY: _____ DATE: _____</p>	<p>The Probate Judge had Covid and was under quarantine. These 2 employees had to perform duties to facilitate her in preparing for the election</p>
TOTAL:	<p>\$665.12 ✓</p>	

**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
~~\$1,300.02~~ 2,032.04 ✓

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, Susan H. Shower, in my capacity as the Judge of Probate of Barbour 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, Paige Smith, in my capacity as the Absentee Election Manager of Barbour 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, Earl Gilmore, in my capacity as Chair/President of Barbour 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: Barbour
Signature of Chair/President of the County Commission: [Signature]
Date: 11-19-20

SWORN AND SUBSCRIBED before me on this 19th day of November, 2020.

MY COMMISSION EXPIRES the 14th day of August, 2021.

[Signature]
(SEAL) SIGNATURE OF NOTARY PUBLIC

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