

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: Lauderdale

Mailing Address:  
(Address where check will be mailed) P.O. Box 1059  
Florence AL 35631

Name of Primary Contact: Brenda Bryant  
Direct Telephone Number: 256-760-5750  
Email: lbryant@lauderdalecountyal.gov

Name of Secondary Contact: Shana Thompson  
Direct Telephone Number: 256-760-5859  
Email: sthompson@lauderdalecountyal.gov

Approved: \$3576.02  
J.H. Merrill  
12/7/20

RECEIVED  
JB  
DEC 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
Extension Cords and Power Strips for Poll Books Flash Drives and USB Drives for Election Reporting, Business Card Pockets to identify voting machine locations on devices	\$ 1,730.02  <b>APPROVED</b> BY: _____ DATE: _____	Election Supplies for electronic reporting + poll books
Absentee Election Assistant - Denise Moore June 3 - July 2	\$ 275.00  <b>APPROVED</b> BY: _____ DATE: _____	AEM Temporary Staff June 3 - July 2
Absentee Election Assistant - Tina Beck June 3 - July 2	\$ 341.00  <b>APPROVED</b> BY: _____ DATE: _____	
Student Poll Worker Election Day Ginger Hester	\$ 50.00  <b>APPROVED</b> BY: _____ DATE: _____	Student Poll Worker Election Day Nov.
AEM Temporary Staff additional days worked not requested prior Denise Moore 8 days Tina Beck 8 days \$ 75/day (Sep 9 - Nov 10)	<b>APPROVED</b> \$ 600  <b>APPROVED</b> \$ 600 BY: _____ DATE: _____	AEM Temporary Staff Sept 9 - Nov 10 (days not requested prior)
<b>TOTAL: \$ 3,596.02</b> ✓		

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**

\$ 3,596.02 ✓

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, Will Motley, in my capacity as the Judge of Probate of Lauderdale 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, Missy Thomas, in my capacity as the Absentee Election Manager of Lauderdale 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, Danny Pettus, in my capacity as Chair/President of Lauderdale 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:

Lauderdale

Signature of Chair/President of the County Commission:

Danny Pettus

Date:

12/1/2020

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

MY COMMISSION EXPIRES the 6<sup>th</sup> day of June, 2023.

(SEAL)

Shana French Thompson

SIGNATURE OF NOTARY PUBLIC

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