Entire packet (Cover letter, checklist, signed request form, and supporting documents/bank statements) must be emailed to sheriffs@comptroller.alabama.gov.

- **Cover Letter**
  - Must be signed by the County Commission and Sheriff’s Office
  - Must list the dollar amount the County is requesting, and state the County's Feeding Fund is depleted.
  - Must contain sworn statements from the County Commission Chair and the Sheriff addressing why the Sheriff's Feeding Fund is depleted.
  - Please note that a County Commission may not receive more than 80% of the actual cost overrun substantiated by financial records up to a maximum of $25,000 per year.

- **Emergency Feeding Fund Request Form**

- **Listing of funds received from the State for feeding of prisoners for the current fiscal year.**
  - Bank statements of the prisoner feeding fund activity for the current fiscal year.
  - Copies of statements and/or invoices concerning payment activity for the current fiscal year.
  - If funds other than the prisoner feeding fund were used to feed state inmates, the financial records for that fund must be included as well.

- The financial records must be presented to the Comptroller’s Office in an organized manner. If the Comptroller’s Office cannot balance the financial records presented, funds may not be awarded to the requesting County.
Cover Letter Sample

State Comptroller's Office
Shared Services
State of Alabama, Dept. of Finance
100 North Union Street, Suite 277
Montgomery, AL 36130

____________________, 2022

Dear Comptroller,

The _________________ County Commission and the _________________ County Sheriff kindly request $____________ from the Emergency Prisoner Feeding Fund established by Code of Alabama § 14-6-51 (1975) to address the financial emergency currently faced by the _______________ County Sheriff’s Department Inmate Feeding Fund. Unforeseeable increases in the price of food during [INSERT DATES], has resulted in the financial emergency necessitating this request. [EXPLANATION OF FINANCIAL EMERGENCY NECESSITATING THIS REQUEST]. At this time, the Inmate Feeding Fund has been completely depleted, owing $________ to the _____________ Fund. At the time of this letter, the Inmate Feeding Fund now has a negative balance.

A copy of the _______________ County Commission’s resolution authorizing this request is attached. Also attached are the relevant financial records demonstrating the need for assistance. Please let us know if you need any additional information to process this request.

We hope that you will assist us in receiving the funding we so desperately need to provide meals for the inmates.

Sincerely,

________________________________________________

___________________, ___________ County Sheriff

________________________________________________

_______________, __________County Commission Chairman