

**Statement of Non-Discrimination
By Organizations Funded in the
South Carolina General Appropriations Act**

To meet requirements of a provision of the South Carolina General Appropriations Act regarding your funding, please fill in the blanks below, sign and return to PRT with your other credentials. If desired, you may retype the statement on your own letterhead.

Statement of Non-Discrimination

11.21.23

Date

Assurance is hereby given by the

Charleston Area Convention & Visitors Bureau

(Name of Organization)

that no person shall, upon the grounds of race, creed, color or national origin be excluded from participation in, be denied the benefit of or be otherwise subjected to discrimination under any program or activity for which this organization is responsible.

Signature

Shel J. Hill

Title

President & CEO

LTH
Emailed 11.29.23
- Included excel application
- audit FY 20/23
- Budget FY 23/24

**SOUTH CAROLINA DEPARTMENT OF PARKS, RECREATION
&
TOURISM**

PROCUREMENT CERTIFICATION FORM

GRANTEE NAME: Charleston Area Convention & Visitors Bureau
PROJECT NAME: SCATR : Historic Charleston & Resort Islands

I hereby certify that all labor, materials and contracts acquired or performed in the accomplishment of the above named project will be accomplished in accordance with the named entity's established procurement guidelines. Any questions, concerns or grievances should be directed to this agency.

Helen T. Hill
PRINTED NAME

President & CEO
TITLE

Helen T. Hill
SIGNATURE

11.21.23
DATE



State of South Carolina Request for Contribution Distribution

This form is designed to collect the information required by South Carolina in accordance with Proviso 117.21 of the appropriations act and Executive Order 2022-19. This form must be submitted to the state agency that is providing the contribution for the designated organization. The state agency providing the contribution should use this form to collect information from the designated organization. The information must be collected from the designated organization before the funds can be disbursed.

Contribution Information		
Amount	State Agency Providing the Contribution	Purpose
\$181,818.18	P280 - Department of Parks, Recreation, and Tourism	Advertising and promotion of tourism in the Historic Charleston & Resort Islands region through SCATR

Organization Information	
Entity Name	Charleston Area CVB or Explore Charleston
Address	375 Meeting Street
City/State/Zip	Charleston, SC 29403
Website	www.explorecharleston.com
SCEIS Vendor #	7000071954
Entity Type	Nonprofit Organization

Organization Information

Entity Name	Charleston Area CVB or Explore Charleston
Address	375 Meeting Street
City/State/Zip	Charleston, SC 29403
Website	www.explorecharleston.com
SCEIS Vendor #	7000071954
Entity Type	Nonprofit Organization

Organization Contact Information	
Contact Name	Helen T. Hill
Position/Title	CEO
Telephone	843-853-8000
Email	hhill@explorecharleston.com

Organization Contact Information

Contact Name	Helen T. Hill
Position/Title	CEO
Telephone	843-853-8000
Email	hhill@explorecharleston.com

Plan/Accounting of how these funds will be spent:		
Description	Budget	Explanation
Paid Marketing efforts via layered advertising mediums	\$112,727.27	Includes online digital, print, radio, television, OTT streaming and billboard may be utilized and direct mail may be deployed.
Earned Media efforts strategically sought to compliment paid advertising	\$25,454.54	Includes development channels such as Society of American Travel Writers, Public Relations Society of American, National Association of Black Journalists, US Travel Association, Travel South and British Guild of Travel Writers.
Sales initiatives geared towards recruiting various group business to our area	\$32,727.27	Over 30 vetted tradeshow, solely focused on lodging "fits" for our area such as corporate sales, association, government and incentive business, nation and international tour operators, weddings and SMERF markets
Visitor Services efforts through our four area visitor centers	\$10,909.10	Includes Call Center and Chat functions for those potentially considering a visit to our community
Grand Total	\$181,818.18	

Please explain how these funds will be used to provide a public benefit:

Efforts will drive visitation and increased economic impacts,
as defined in the application.

Organization Certifications

- 1) Organization hereby gives assurance that no person shall, upon the grounds of race, creed, color, or national origin, be excluded from participation in, be denied the benefit of, or be otherwise subjected to discrimination under any program or activity for which this organization is responsible.
- 2) Organization certifies that it will provide quarterly spending reports to the Agency Providing Contribution listed above.
- 3) Organization certifies that it will provide an accounting at the end of the fiscal year to the Agency Providing Contribution listed above.
- 4) Organization certifies that it will allow the State Auditor to audit or cause to be audited the contributed funds.



Organization Signature

Helen T. Hill

Printed Name

Title

CEO

Date

11.29.23

Certifications of State Agency Providing Contribution

- 1) State Agency certifies that the planned expenditure aligns with the Agency's mission and/or the purpose specified in the appropriations act.
- 2) State Agency certifies that the Organization has set forth a public purpose to be served through receipt of the expenditure.
- 3) State Agency certifies that it will make distributions directly to the organization.
- 4) State Agency certifies that it will provide the quarterly spending reports and accounting received from the organization to the Senate Finance Committee, House Ways and Means Committee, and the Executive Budget Office by June 30, 2024.
- 5) State Agency certifies that it will publish on their website any and all reports, accountings, forms, updates, communications, or other materials required by Proviso 117.21 of the appropriations act.
- 6) State Agency will certify to the Office of the Governor that it has complied with the requirements of Executive Order 2022-19 by June 30, 2024.





Agency Head Signature

Duane Parrish

Printed Name

12/4/2023

Date

CHARLESTON AREA CONVENTION & VISITORS BUREAU

Corporate Information

Entity Id **00071419**
Entity Type **Nonprofit**
Status **Good Standing**
Domestic/Foreign **Domestic**
Incorporated State **South Carolina**

Important Dates

Effective Date **03/07/2002**
Expiration Date **N/A**
Term End Date **N/A**
Dissolved Date **N/A**

Registered Agent

Agent **HELEN T HIL**
Address **81 MARY ST**
CHARLESTON, South Carolina 29403

[Request Documents](#)[Add Filing](#)

Official Documents On File

Filing Type	Filing Date
Amendment	07/01/2013
Incorporation	03/07/2002