

Basic Information for Your Organization

Your Organization	
Name	City of Abbeville
Address (Street or PO Box)	PO Box 40
Address (City, State, Zip)	Abbeville, SC 29620
SCEIS Vendor Number (Determines remittance)	7000030106
Organization website address	https://www.abbevilicitysc.com/
Organization type (nonprofit, local government, etc.)	Municipal Government

Organization Contact	
Name	Michael Clary
Position	Deputy Administrative Officer
Telephone	864-366-1800
Email	mclary@abbevilicitysc.com

State Contribution	
Amount	\$5,000
Earmark Name	Saluda and McCormick County Parks and Recreation Grants
Project Summary	Civic Center Phase C
State Agency Providing Contribution	SCPRT

Person Completing this Report	
Name	Michael Clary
Position	Deputy Administrative Officer

Accounting of how the funds will be spent

Provide below an accounting of how the state funds will be spent*. Total expenditures should equal appropriation received. Expenditure descriptions similar to those used in your organization's accounting should be used to maximize comparability of this budget to your organization's accounting of actual expenditures. For any category exceeding 10% of the total state contribution, provide additional details or subcategories.

* Per Proviso 11-9-110, a contribution must not be made to an organization until it agrees in writing to allow the control by the State Auditor.

[illegible]

Insert additional lines if needed. Grand total should equal the state funds to be received.

Success Measures

List the success measures that will determine the effectiveness of the use of the state funds to be received. Success measures should be stated in a way that can be measured. At least one success measure is required, but if there are more success measures than lines provided, copy and paste the last line as needed to expand the list.

Measure	Description
1	This project will provide for the upgrade of the Abbeville Civic Center which hosts tens of thousands of visitors each year.
2	Improve Quality of Life for City Residents
3	Increase economic impact of Civic Center Events
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Goals to be accomplished

List the goals to be accomplished with the state funds to be received. Goals should be stated in a way that can be measured. At least one goal is required, but if there are more goals than lines provided, copy and paste the last line as needed to expand the list.

Goal	Description
1	Increase Civic Center Visitors to 40,000 by 2027
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**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

4/16/24

Date

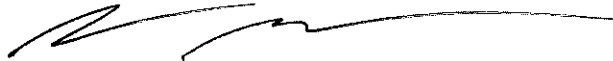
Assurance is hereby given by the

City of Abbeville

(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



Title

Deputy Administrative Officer

SOUTH CAROLINA DEPARTMENT OF PARKS, RECREATION
&
TOURISM

PROCUREMENT CERTIFICATION FORM

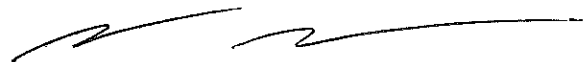
GRANTEE NAME: City of Abbeville

PROJECT NAME: CLC Center Phase C

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.

Michael Clay
PRINTED NAME

Deputy Administrative Officer
TITLE


SIGNATURE

4/16/24
DATE