

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

PROCUREMENT CERTIFICATION FORM

GRANTEE NAME: Amazing Grace Park

PROJECT NAME: Park Operations

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.

Holly Barr
PRINTED NAME

Park Manager
TITLE

Holly Barr
SIGNATURE

October 2, 2024
DATE