

## 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 before the funds can be disbursed.

		Contribution Information
Amount	State Agency Providing the Contribution	Purpose
\$1,500,000.00	P280 - Department of Parks, Recreation, and Tourism	African American Historic Park

Organization Information				
Entity Name	City of Sumter			
Address	21 North Main Street			
City/State/Zip	Sumter, SC 29150			
Website	www.sumtersc.gov			
Tax ID#	57-6000246			
Entity Type	Municipality			

Organization Contact Information				
Contact Name	Howie J. Owens			
Position/Title	Assistant City Manager			
Telephone	803-436-2535			
Email	howens@sumtersc.gov			

Plan/Accounting of how these funds will be spent:					
Description	Budget	Explanation			
Mobilization	\$220,000.00				
Demolition/Clear and Grub	\$100,000.00				
Erosion Control & Inspections	\$7,500.00				
Traffic Control	\$35,000.00				
Grading/Earthwork/Stormwater/Rain Garden/Drainage/Detention	\$225,000.00				
Paving	\$185,000.00				
Concrete & Plaza Paving	\$245,000.00				
Walls	\$415,000.00				
Landscape/Irrigation/Site Furnishings/Lighting	\$67,500.00				
	Grand Total \$1,500,000.00				

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

The allocated funds will be utilized for the construction of an African American Historic Park situated on Manning Avenue, with the primary objective of commemorating the invaluable contributions of local African American pioneers while fostering community unity and promoting cultural enrichment.

	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					
	ng reports to the Agency Providing Contribution listed above.				
	the end of the fiscal year to the Agency Providing Contribution listed above.				
4) Organization certifies that it will allow the State Auditor t					
Organization Signature	Assistant City Manager Title				
Howie J. Owens	10/17/2024				
Printed Name	Date				
	Certifications of State Agency Providing Contribution				
	s with the Agency's mission and/or the purpose specified in the appropriations act.				
	a public purpose to be served through receipt of the expenditure.				
3) State Agency certifies that it will make distributions direc	tly to the organization.				
	ending 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, 202	25.				
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	at it has complied with the requirements of Executive Order 2022-19 by June 30, 2025.				
Pune Parinh	10/22/2024				
Agency Head Signature	Date				
Duane Parrish					

Printed Name