

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

**PROCUREMENT CERTIFICATION FORM**

GRANTEE NAME: Cancer Survivors Park Alliance

PROJECT NAME: Completion of Cancer Survivors Park Master Plan  
Capital Projects – Continued

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.

Kay J. Roper  
PRINTED NAME

Executive Director  
TITLE

A handwritten signature in cursive script that reads "Kay J. Roper". The signature is written in dark ink and is positioned above a horizontal line.

\_\_\_\_\_  
SIGNATURE

October 15<sup>th</sup>, 2024  
DATE