SOUTH CAROLINA DEPARTMENT OF PARKS, RECREATION & TOURISM

PROCUREMENT CERTIFICATION FORM

PROJECT NAME: Town of Clover Recreation Facility
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.
Zack Lester III
PRINTED NAME
Town Administrator
TITLE
Polyters.
SIGNATURE
December 23 2024
DATE

GRANTEE NAME: Town of Clover