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**SOUTH CAROLINA DEPARTMENT OF PARKS, RECREATION**

**&**

**TOURISM**

PROCUREMENT CERTIFICATION FORM

GRANTEE NAME: International African American Museum

PROJECT NAME: Statewide African American History Tourism and Marketing

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.

Tonya M. Matthews, PhD

PRINTED NAME

President and Chief Executive Officer

Text, letter

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\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

SIGNATURE

October 7, 2022

DATE