

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 of 2022 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. The information must be collected from the designated organization before the funds can be disbursed.

Contribution Information							
Amount	State Agency Providing the Contribution	Purpose					
385mm		walking trail and new entrance.					
Organization Information		Organization Contact Information					
Entity Name	Allendale, County	Contact Name Willa Jennings					

Entity Name	Allendale County
Address	526 Memorial Ave North
City/State/Zip	Allendara, Sc. 29810
Website	WWW. Allendala COUNTY COM
Tax ID#	57-1000301
Entity Type	COUNTY GOVERNMENT

Organization Contact Information					
Contact Name	Willa Jennings				
Position/Title	Carreil inomain				
Telephone	802-686-474700/0042				
Email	wiennings @ allendale monty gov				

Plan/Accounting of how these funds will be spent:							
Description	Budget	Explanation					
Functional will be used to crossite, an adolitional.	325000	To create a new entrance/exit forthe					
Entrappel exit for the Allendale County Office on	30	property ensuring a safer access to					
Agine as well as construction of availing		and from Highway 278 for citizens					
trail on the property		particularly the senior population who a					
		4the most Sten vent oxypoons of the Socility					
		The reastrockion of a walking trail on the					
		property will apply an author for pictions to					
		increased onusical activity resultand in more					
		health					
Grand Total	\$0.00						

325,00

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

-		ALC: U.S.		*	100000
Org	anızı	mon	Certi	a forth n	ons
- · · ·					-

- 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 activity for which this organization is responsible.
- 2) Organization certifies that it will provide quarterly spending reports to the Agency Providing Contribution listed above.
- 3) Organization certifies that it will provide an accounting at the end of the fiscal year to the Agency Providing Contribution listed above.
- 4) Organization certifies that it will allow the State Auditor to audit or cause to be audited the contributed funds.

Organization Signature

Printed Name

Interior Administrator

Date

Certifications of State Agency Providing Contribution

- 1) State Agency certifies that the planned expenditure aligns with the Agency's mission and/or the purpose specified in the appropriations act of 2022.
- 2) State Agency certifies that the Organization has set forth a public purpose to be served through receipt of the expenditure.
- 3) State Agency certifies that it will make distributions directly to the organization.
- 4) State Agency certifies that it will provide the quarterly spending 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, 2023.
- 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 of 2022.
- 6) State Agency will certify to the Office of the Governor that it has complied with the requirements of Executive Order 2022-19 by June 30, 2025.

Agency Head Signature

Comir D. Muny

Date

Printed Name

Funding codes:

11120124

CC: LOVE O ADDO 10

FA: LOWOXPR20

Fund: 10050025

GIL: 5190750000

Speed Pgv