

NOTICE

TO: All Recreation Fund Applicants

FROM: Bamberg County Citizens Recreation Study Committee

The Committee will accept the attached application for grant monies until **12:00 p.m. on Wednesday, May 26, 2021**, in the County Administrator's office located in the Bamberg County Courthouse Annex – Isaiah Odom Building - 1234 North Street – Bamberg, SC 29003.

This will be the only round of applications for this fiscal year (July 1, 2020 – June 30, 2021). Applications are available online at www.bambergcounty.sc.gov and in the County Administrator's office. Emphasis and priority will be placed on projects which serve a large portion of the youth (18 and under) of the County and those which have not received funding previously.

All applicants must furnish proof that public notice has been given through the local news media that participation by all segments of the public is encouraged and sought.

Applications must be complete in order to be considered. *You must describe, in detail, the planned uses of funds for each aspect of your planned project. Please know that this will play a vital part in determining funding for your project.*

Projects approved will be funded on a **reimbursement basis only**. Items purchased after **July 1, 2020 and prior to June 30, 2021** are eligible for reimbursement. **Verifiable proof of all expenditures must be presented in order to receive reimbursement.**

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NO REIMBURSEMENT WILL BE MADE IN AN AMOUNT GREATER THAN THE PURCHASE AMOUNT, EVEN IF THE ORIGINAL AMOUNT APPROVED WAS LARGER.

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BAMBERG COUNTY ASSUMES NO LIABILITY OR RESPONSIBILITY FOR PROJECTS FUNDED THROUGH THIS PROGRAM. ALL APPLICANTS BY THEIR APPLICATION, AGREE TO HOLD BAMBERG COUNTY HARMLESS FROM ALL LIABILITY ASSOCIATED WITH POSSIBLE FUNDING OF THEIR REQUEST.

**1234 NORTH STREET * P. O. BOX 149 * BAMBERG, SOUTH CAROLINA 29003
(803)245-5191 FAX: (803) 245-1219**



BAMBERG COUNTY RECREATION FUND

PROJECT APPLICATION

SECTION I

NAME OF ORGANIZATION/ CONTACT PERSON	AMOUNT REQUESTED	TOTAL NUMBER TO BE SERVED	OVERALL INCOME	OVERALL EXPENSES

SECTION II (Pertains to Last Year's Funding)

NAME OF ORGANIZATION/ CONTACT PERSON	AMOUNT REQUESTED	TOTAL NUMBER TO BE SERVED	OVERALL INCOME	OVERALL EXPENSES

SECTION III. DESCRIPTION OF PROJECT

a. Describe activity or promotion planned and age group and number expected to benefit. (Attach additional sheets if needed).

b. Describe in detail the planned uses of funds for each aspect of the planned project. (Attach additional sheets if needed).

SECTION IV. Name your other sources of income for your organization.

SECTION V. RESPONSIBLE PERSON

a. Name of responsible individual:

b. Address to which all correspondence is to be sent:

c. Business and home telephone numbers of responsible person:

(Home)

(Business)

(Cell)

SECTION VI. CERTIFICATION

The signature of the responsible person will serve as a contract, if funds are awarded, that the facility, supplies, or activity funded will be open to the public on a non-discriminatory basis.

Signature: _____

Title: _____

Date: _____

