



South Carolina
Department of Labor, Licensing and Regulation



110 Centerview Drive
Post Office Box 11329
Columbia, SC 29211-1329
(803) 896-4300

Henry D. McMaster
Governor

Emily H. Farr
Director

September 25, 2024

Mr. Billy McAdams, Fire Chief
Townville Fire Department Station #17
P O Box 70
Townville, SC 29689

Dear Mr. McAdams,

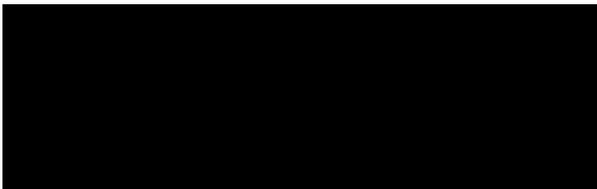
Your organization has been included in the South Carolina Department of Labor, Licensing and Regulation (LLR) FY 2024-25 Appropriations Act (H.5100) for a one-time, non-recurring appropriation of \$55,000 in State general funds.

To initiate the disbursement of funds, please complete the FY25 Earmarked Appropriations Disbursement Request form included with this communication. Proviso 117.21 requires LLR to obtain a plan for how the funds will be expended by the organization and how the expenditures will provide a public benefit before disbursing funds. Your organization must submit these items before disbursement. LLR may share the requested documentation with the Executive Budget Office via the Department of Administration and publish the documentation on our website pursuant to the Governor's Executive Order 2022-19.

Please email the requested documentation to appropriations.disbursements@llr.sc.gov by October 02, 2024, and include your programmatic and fiscal contacts' names, direct phone numbers, and email addresses. Upon receipt and review of the information provided, LLR will reach out with any questions before funds are disbursed.

If you have any additional questions, contact Pameco Suber at (803)-832-8304 or by email at appropriations.disbursements@llr.sc.gov.

Sincerely,



Brittany N. Hammond
Chief Financial Officer

**Statement of Non-Discrimination
By Organizations Funded in the
South Carolina General Appropriations Act**

To meet requirements of a provision of the South Carolina General Appropriations Act regarding your funding, please fill in the blanks below, sign and return to LLR with your other credentials. If desired, you may retype the statement on your own letterhead.

Statement of Non-Discrimination

10-8-2024
Date

Assurance is hereby given by the

Townville Fire Department
(Name of Organization)

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.

Signature



Title

Chief of Department

e with Proviso 117.21 of the appropriations act and Executive Order 2022-
or the designated organization. The state agency providing the contribution
nation must be collected from the designated organization before the funds

Purpose

FF Equipment

Organization Contact Information

Billy McAdams
Chief of Department

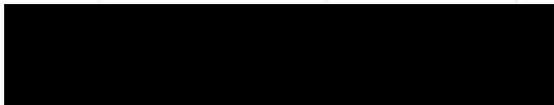
Will be spent:

Explanation

Will provide a public benefit:

original origin, be excluded from participation in, be denied the benefit of, or
inadvisable.

- 2) Organization certifies that it will provide quarterly spending reports to the Agency Providing Contribution
- 3) Organization certifies that it will provide an accounting at the end of the fiscal year to the Agency Providing
- 4) Organization certifies that it will allow the State Auditor to audit or cause to be audited the contributed f



Chef

Title

W.R. McAdams II

Printed Name

80-2-2024

Date

Certifications of State Agency Providing C

- 1) State Agency certifies that the planned expenditure aligns with the Agency's mission and/or the purpose
- 2) State Agency certifies that the Organization has set forth a public purpose to be served through receipt c
- 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 th Committee, and the Executive Budget Office by June 30, 2025.
- 5) State Agency certifies that it will publish on their website any and all reports, accountings, forms, update appropriations act.
- 6) State Agency will certify to the Office of the Governor that it has complied with the requirements of Exec

Agency Head Signature

Date

Printed Name



State of South Carolina Contribution Expenditure Report

This form is designed to collect the quarterly and annual expenditure reports required by South Carolina Code of Laws, Title 5, Chapter 15, Article 1, Section 5-15-100, Order 2022-19. This form must be submitted to the state agency that is providing the contribution.

Contribution Information

Amount	State Agency Providing the Contribution
	SC STATE TREES

Organization Information

Entity Name	Townville Fire Department
Address	PO Box 70 8508 Hwy 24
City/State/Zip	Townville SC 29689
Website	Townville Fire, SC
Tax ID#	
Entity Type	FD, Charitable Org

Name
Position/Title
Telephone
Email

Reporting Period

Reporting Period	9-30-24
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Accounting of how the funds have been expended

Description <i>(Attach additional detail for subgrantees and affiliated nonprofits)</i>	Budget	Quarter 1
	55,000.00	55,000.00
Grand Total	\$0.00	\$0.00

Explanation of any unspent funds (to be provided only if unspent funds exist)

HAVE NOT RECEIVED FUNDS YET

Expenditure Certification

The Organization certifies that the funds have been expended in accordance with the Plan provided to the State of South Carolina.

[Signature]

W. R. McAdams

Printed Name

Chief

10-2-24

Date

Carolina in accordance with Proviso 117.21 of the appropriations act and Executive Order 100 to the designation organization at the end of year quarter and by June 30, 2025.

Purpose

Organization Contact Information
Billy McAdams
Chief of Dept.

Amount spent:				
Expenditures				Balance
Quarter 2	Quarter 3	Quarter 4	Total	
			\$0.00	\$0.00
			\$0.00	\$0.00
			\$0.00	\$0.00
			\$0.00	\$0.00
			\$0.00	\$0.00
			\$0.00	\$0.00
			\$0.00	\$0.00
			\$0.00	\$0.00
\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

Amounts remain at the end of the fiscal year) :

Agency Providing the Distribution and for a public purpose.

