

COMMUNITY PROJECT ACCOUNT (Small, De Minimus Public Projects)

APPLICATION

1) Name of Project: Greater Greenvi	ille Scottish Games
Check Project Type:	
□ Nonrecurring community requests for infrastructure:	
☐ Flooding	
□ Roads	
□ Lights	
Sewer and drainage	
☐ Public buildings and grounds	
☐ Infrastructure related studies	
$\sqrt{}$ Contributions to local governments in Greenville County for community projects	
2) Amount of Funds Requested: \$5,000	
Project Sponsor Organization: <u>City of Travelers Rest</u>	
Mailing Address: 6711 State Park Road	
Travelers Rest, SC 296	590
4) Contact Person:	
Name <u>Dianna Turner</u>	Title City Administrator
Telephone <u>834.8740</u>	Alt. Telephone No
Email dianna@travelersrestsc.com	Fax No834-7270
Council Representative(s)	Meadows
5) Project Timeline ~ Beginning: 5/2014 MONTH/DAY/YI	EAR MONTH/DAY/YEAR
6) Date Funds are Needed:June, 2014	

7) Location of Project: Furman University, City of Travelers Rest		
8) Project Description: (Attach additional pages if necessary)		
a. General Description: The City of Travelers Rest is spe	onsoring the Wee	
Scotland Venue at the Scottish Games. The City is able to provide \$50	00 of the \$10,000	
sponsorship amount and requests the County's financial assistance to	provide the additional	
\$5000.		
b. Benefit project will provide the Community:		
This event brings visitors from all over the regional and w	orld. These	
attendees stay in our hotels and dine and shop in our business establish	hments. Sponsorship	
helps make the event possible.		
c. Additional Comments:		
9) Project Budget: a. Total Project Budget including all sources of funds: \$ 10,00 b. Percent request equals of the total Project Budget?		
TOTAL:	10,000	
Signed 5-28-	5-28-14 Date	
MayorTitle		