

## **COMMUNITY PROJECT ACCOUNT**

(Small, De Minimus Public Projects)

## **APPLICATION**

1) Name of Project: <u>Sheriff's Office Defensi</u>	ve Driving	
Check Project Type:		
□ Nonrecurring community requests for infras	tructure:	
☐ Flooding		
☐ Roads		
☐ Lights		
☐ Sewer and drainage		
□ Public buildings and grounds		
☐ Infrastructure related studies		
X Contributions to local governments in Green	nville County for community projects	
2) Amount of Funds Requested:\$5,000		
3) Project Sponsor Organization: <u>SC-TAC</u>		
Mailing Address:		
4) Contact Person:		
Name Jody Bryson	Title CFD	
Telephone Alt. Telephone No		
Email	Fax No	
Council Representative(s)Butch Kirven		
5) Project Timeline ~ Beginning:	Ending:	
MONTH/DAY/YEAR	MONTH/DAY/YEAR	

6) D	ate Fu	nds are Needed:	_
7) Lo	ocatio	n of Project: SCTAC Test Track	_
8) Pı	a.	Description: (Attach additional pages if necessary)  General Description: <u>Use test track for deputy defensiing</u>	ve driving
	b.	Benefit project will provide the Community:	
	c.	Additional Comments:	
9) Pı	a.	Budget:  Total Project Budget including all sources of funds: \$5,000	
List	b. below	Percent request equals of the total Project Budget? 1009  all funding sources for this project:	<u>o</u>
Func	ding So	ource	Amount
		y Project Account Funds	
		TOTAL:	
		Signed Date	
		Jate	
		Title	

County of Greenville Community Project Account Application