



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
\$300,000.00	D500 - Department of Administration	Housing Repairs

Organization Information

Entity Name	Tri-City Visionaries, INC
Address	8801 Bluff Road
City/State/Zip	Eastover, SC 29044
Website	https://tricityvisionaries.com
Tax ID#	20-2965900
Entity Type	Nonprofit Organization

Organization Contact Information

Contact Name	Monika Lamb
Position/Title	Program Director
Telephone	803-814-5490
Email	tcv29209@gamil.com

Plan/Accounting of how these funds will be spent:

Description	Budget	Explanation
Program Expense	\$270,000.00	Supplies for roofing, ramps, bathrooms, kitchen, flooring, propane, mold, electric, plumbing, dirt build up, columns, windows, equipment, labor,
Adminstrative Expense	\$27,000.00	Program Director \$7,000, Two Program Coordinator \$10,000; Site Manager Two Site Managers \$10,000
Marketing Expense	\$1,000.00	Flyers and Ads (Radio, Social Media, newspaper)
Logistical Clean Up	\$2,000.00	Cleaning services around sites, dumpsters, porta potty, etc
Grand Total	\$300,000.00	

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

Tri-City Visionaries repairs homes who are unsafely exposed to infectious disease and houses that suffer from unsafe conditions. We will purchase supplies, materials, and other items needed to repair the homes.

Organization Certifications

- 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.

Monika Lamb

Organization Signature

Program Director

Title

Monika Lamb

Printed Name

10/23/2023

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, 2023.

Marcia S. Adams

Agency Head Signature

12/4/23

Date

Marcia S. Adams

Printed Name