



**Greenville
County**

COMMUNITY PROJECT ACCOUNT
(Small, De Minimus Public Projects)

APPLICATION

1) Name of Project: **TRAVELERS REST CHRISTMAS PARADE**

Check Project Type:

Nonrecurring community requests for infrastructure:

- Flooding
- Roads
- Lights
- Sewer and drainage
- Public buildings and grounds
- Infrastructure related studies

Contributions to local governments in Greenville County for community projects

2) Amount of Funds Requested: **\$2000**

3) Project Sponsor

Organization: **City of Travelers Rest**

Mailing Address: **6711 State Park Road**

Travelers Rest, SC 29690

4) Contact Person:

Name **Dianna Turner** Title **City Administrator**

Telephone **864-834-8740** Alt. Telephone No. _____

Email **Dianna@travelersrestsc.com** Fax No. **864-834-7270**

Council Representative(s) _____

5) Project Timeline ~ Beginning: **12/12/2015** Ending: **12/12/2015**
MONTH/DAY/YEAR MONTH/DAY/YEAR

6) Date Funds are Needed: **11/27/2015**

7) Location of Project: **Main Street Travelers Rest**

8) Project Description: (Attach additional pages if necessary)

- a. **General Description:** This is our 43rd annual Christmas parade
- b. **Benefit project will provide the Community:**
 Last year our parade brought over 10,000 visitors to our community of 5000 citizens.
 There is great potential for our local businesses to benefit from our visitors and
 showcase the investment in our Swamp Rabbit Trail and other Main Street
 improvements. It also provides free entertainment to our citizens and increases unity
 within our community.
- c. **Additional Comments:** The funds received from this grant will help defray
 parade expenses. We charge our entrants a minimal fee of \$25 in an effort to
 encourage more participation. We will pay three bands this year \$300 each to help
 cover their transportation costs. We have incurred additional expenses this year to
 carry event insurance due to heightened safety issues and to replace worn signs and
 allow for smoother directions on parade day. Joe Dill and Willis Meadows have
 faithfully supported our event and we hope they will be allowed to continue to do so.

9) Project Budget:

- a. **Total Project Budget including all sources of funds:** \$ 4500
- b. **Percent request equals of the total Project Budget?** 44%

List below all funding sources for this project:

Funding Source	Amount
Registrations fees	2500
County Donation (Dill/Meadows)	2000
City of Travelers Rest	500
TOTAL:	4500

 Dianna Turner
Signed

 9/28/15
Date

 Dianna Turner, City Administrator
Title