



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

X 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 Gracely 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: 12/09/2017 Ending: 12/09/2017
MONTH/DAY/YEAR MONTH/DAY/YEAR

6) Date Funds are Needed: 12/01/2017

7) Location of Project: Main Street Travelers Rest

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

- a. **General Description:** This is our 45th 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 \$30 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

[Signature]
Signed
City Administrator
Title

9/13/17
Date