



2022 Laurens County

American rescue plan
Act Grant Application

Applications must be received by 4/1/2022

“Late Applications shall not be considered.”

Return applications to: *Laurens County*

Attn: Administration

100 Hillcrest Square

Laurens, SC 29360

Or email to: ARPA@co.laurens.sc.us

| | |
|----------------------------|--|
| Amount you are requesting: | \$ 300,000 (to be used over 3 years for personnel to address court backlogs) |
|----------------------------|--|

SECTION I: ORGANIZATION INFORMATION

| | |
|-------------------------------|-----------------------------------|
| Name of Organization: | Eighth Circuit Solicitor's Office |
| Contact Name and Title: | David Stumbo, Solicitor |
| Mailing Address: | Post Office Box 516 |
| Street Address (if different) | (Hillcrest Square, Laurens) |
| Phone Number: | 864-942-8800 |
| City, State and Zip Code | Greenwood, SC 29648 |
| Fax Number: | 864-942-8830 |

| | | |
|---|--|--|
| Email Address: | dstumbo@greenwoodsc.gov | |
| Website: | www.scsolicitor8.org | |
| How long has your organization been in existence? | | |

1

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NOTE: Attach a list of your organization's governance body: Board of Directors, Chief Officers and Executive Director.

Tax Status (check one)

X Other Tax-exempt Local Government

Please attach a copy of your organization's IRS tax status determination letter (not applicable to government agencies or religious congregations). A tax exempt identification number is not sufficient.

| | |
|---|------------|
| Federal Employer Identification Number: | 57-0914200 |
|---|------------|

FOCUS AREA:

Health, Wellness, Public Safety/Law enforcement

PROGRAM SERVICES

Children Families Youth Senior Citizens

Other (Specify)

| | |
|--------------------------------|--|
| Geographic area served: | |
|--------------------------------|--|

| | |
|--|------|
| Percentage of service delivered to the Citizens of Laurens County | 100% |
|--|------|

SECTION II FINANCIAL INFORMATION

Applicant's overall operating budget: \$ Fiscal Year to M/D/YY M/D/YY

Please list the history of funding to your agency from the Laurens County:

| | <u>Year Amount</u> |
|------|--------------------|
| 2018 | \$300,000 |
| 2019 | \$300,000 |

| | |
|------|-----------|
| 2020 | \$375,000 |
|------|-----------|

**PAYCHECK PROTECTION PROGRAM (PPP) AND OR AMERICAN RESCUE PLAN ACT (ARPA)
 FUNDING YOUR ORGANIZATION RECEIVED (INCLUDING FROM OTHER GOVERNMENTS), THE
 AMOUNTS AND WHAT IT IS WAS USED FOR:**

| TYPE OF FUNDS RECEIVED CARES ACT/PPP AND OR ARPA | YEAR RECEIVED | DESCRIPTION OF WHAT FUNDS WERE USED FOR | AMOUNT |
|---|------------------|--|-----------|
| ARPA-Greenwood County | 2022-2024 | Public Safety/Prosecution | \$300,000 |
| | | | \$ |
| | | | \$ |
| | | | \$ |
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| | | | \$ |

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PLEASE COMPLETE THE FOLLOWING BUDGET BREAKDOWN SECTIONS ON THESE PAGES (NO

ATTACHMENTS.) You may get these figures from your most recently submitted IRS Form 990, or you may simply use your overall operating budget.

1. CONTRIBUTIONS, GIFTS, GRANTS & OTHER SIMILAR AMOUNTS

| SOURCE FY 2019 FY 2020 FY 2021 | | | |
|--|-------------|----|----|
| Government Grants | | | |
| Municipal | \$ | \$ | \$ |
| County | \$ | \$ | \$ |
| State | \$ | \$ | \$ |
| Federal other than COVID-19 Funds | \$ 320, 528 | \$ | \$ |
| Foundation Grants | \$ | \$ | \$ |
| Contributions/Federated Campaigns | \$ | \$ | \$ |
| Membership dues | \$ | \$ | \$ |
| Fundraising events | \$ | \$ | \$ |
| TOTAL CONTRIBUTED INCOME | \$ | \$ | \$ |

2. PROGRAM SERVICE REVENUE

| SOURCE FY 2019 FY 2020 FY 2021 | | | |
|---------------------------------------|----|----|----|
| Fees / Sold Services | | | |
| Services | \$ | \$ | \$ |
| Tuition / Fees | \$ | \$ | \$ |
| Workshops, Seminars, Lectures, etc. | \$ | \$ | \$ |
| Other (specify) | \$ | \$ | \$ |
| Other (specify) | \$ | \$ | \$ |
| TOTAL PROGRAM SERVICES REVENUE | \$ | \$ | \$ |

3. OTHER REVENUE

| SOURCE | FY 2019 | FY 2020 | FY 2021 |
|----------------------------------|----------------|----------------|----------------|
| Publications (Newsletters, etc.) | \$ | \$ | \$ |

| | | | |
|---------------------------------------|----|----|----|
| Concessions and/or Merchandise | \$ | \$ | \$ |
| Advertising | \$ | \$ | \$ |
| Space Rental Fees | \$ | \$ | \$ |
| Other (specify) | \$ | \$ | \$ |
| Other (specify) | \$ | \$ | \$ |
| TOTAL EARNED INCOME | \$ | \$ | \$ |

| | | | |
|--------------------------------------|----|----|----|
| TOTAL COMBINED INCOME (1+2+3) | \$ | \$ | \$ |
|--------------------------------------|----|----|----|

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4. EXPENSES

| | FY 2019 FY 2020 FY 2021 | | |
|-------------------------------------|--------------------------------|----|----|
| Program Services | \$ | \$ | \$ |
| Fundraising | \$ | \$ | \$ |
| Administration, Management, General | \$ | \$ | \$ |
| Other (Specify) | \$ | \$ | \$ |
| TOTAL EXPENSES | \$ | \$ | \$ |

If your organization receives "in-kind" support, please list below:

| SOURCE | TYPE OF IN-KIND SUPPORT |
|---------------|--------------------------------|
| | |
| | |
| | |
| | |
| | |

List funds already committed for the project for FY 2022 and the sources of these funds.

| SOURCE | AMOUNT |
|---------------|---------------|
| | \$ |
| | \$ |
| | \$ |
| | \$ |
| TOTAL | \$ |

Who in your organization is responsible for fundraising?
 Not Applicable

5. Will your organization's 2022 budget be significantly different than 2021 and prior years? No

This box is limited to 880 characters including spaces, which is approximately 125 words

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6. FUNDING REQUEST FOR BUDGET YEAR 2022

Please provide breakdown by categories:

| CATEGORY PROGRAM SERVICES | FY 2022 | ADMINISTRATIVE/ GENERAL FY 2022 |
|----------------------------------|----------------|--|
| Supplies | \$ | \$ |
| Equipment (specify) | \$ | \$ |
| Travel/Training | \$ | \$ |
| Personnel | \$ | \$375,000 |

| | | |
|-------------------------------|----|-----------|
| Marketing / Promotions | \$ | \$ |
| Other (specify) | \$ | \$ |
| TOTAL REQUESTED | \$ | \$375,000 |

SECTION III: ORGANIZATIONAL PROFILE AND PROJECT DESCRIPTION

1. Briefly state the history and purpose of your organization.

This box is limited to 1400 characters including spaces, which is approximately 200 words.

2. Describe in detail how the pandemic has affected your organization.

This box is limited to 1400 characters including spaces, which is approximately 200 words.

My office continues to fight for the safety of our community in the courtroom, in spite of the funding challenges our circuit faces. We were able to reduce the backlog of cases by nearly 10 percent before March of 2020 when the court shutdowns began as the result of the COVID pandemic. But coming out of the pandemic shutdowns and the explosion of our case backlogs, my office is desperate for resources and manpower to address these massive caseloads.

The past two years has been a very difficult road for our nation, and our citizens locally have not been immune from the fallout of the COVID pandemic and the resulting government response. We believe that this request is right in line with the purpose of the federal ARP funding, to address a core function of government (the criminal justice system) that has been severely impacted by the pandemic.

3. How will any funding awarded be utilized?

This box is limited to 1400 characters including spaces, which is approximately 200 words.

We are requesting the County of Laurens to set aside funding for a 3-year "grant" prosecutor in our office who would be solely dedicated to cases in Laurens County. This prosecutor would work only on violent and serious cases. The costs including salary (\$70K/year) and fringe benefits for an experienced prosecutor in this position is \$93,870 per year, for a total over three years of \$281,610. The remaining \$18,390 will be used to cover trial expenses for cases in Laurens County.

4. State your organization's ability to continue operations (i.e. current staffing levels, staff qualifications, prior experience, etc.)

This box is limited to 1400 characters including spaces, which is approximately 200 words.

5. Discuss your organization's relationship with other programs in the community designed to meet the same or similar needs, especially those that provide services/assistance to those most impacted by the pandemic. Describe collaborative partnerships that may result. This box is limited to 1400 characters including spaces, which is approximately 200 words.

6. What is your plan for continuing your program(s) in the future, including funding sources?

This box is limited to 1400 characters including spaces, which is approximately 200 words.

I hereby certify that the applicant organization complies with all Americans with Disabilities Act requirements, and does not discriminate on the basis of race, color, age, sex, religion, sexual orientation, physical disability, or national origin, and that all funds that may be received by applicant organization from Laurens County will be solely used for the purposes set forth in this application and will comply with all laws and statutes. In particular, organizations receiving Community Assistance Funding will comply with state regulations requiring organizations to be registered with the South Carolina Secretary of State's Division of Public Charities.

Signature of Chief Executive Officer or Executive Director Date Name and Title

David M. Stumbo, Solicitor

Signature of Chief Financial Officer or Board Chairperson Date Name and Title

Jami Steifle, Circuit Manager

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Make sure your application includes the following:

- your IRS Letter (if applicable),
- a list of officers, staff and board members,
- Completed application with all required signatures.
- a copy of your confirmation letter of registration from the SC Secretary of State's Division of Public Charities

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APPLICATION GUIDELINES

American Rescue Plan Act

Program Purpose

The American Rescue Plan Act (ARPA) was signed into law by President Biden on March 11, 2021, and provides direct relief to cities, towns and villages in the United States through the Coronavirus State and Local Fiscal Recovery Funds (CSLFRF). The U.S. Department of the Treasury is responsible for overseeing this program. CSLFRF provides that states and other governments may spend these funds to “**respond to the pandemic and its negative economic impacts, including assistance to ... nonprofits, or aid to impacted industries such as tourism, travel, and hospitality.**” Laurens County will be awarding grants to non-profits or similar organizations from the CSLFRF to help address critical financial needs of those organizations. **For profit-businesses and individuals are not eligible for these County grants.**

Applications must be received by:
04/01/2022

Questions should be emailed to:

ARPA@co.laurens.sc.us

📎 **All applications must be received by 04/01/2022**

📎 Applications received after this time and date may jeopardize your organization's ability to receive funding.

📎 **One original** copy of the application should be mailed to:

Laurens County

Attn: Administration

100 Hillcrest Square

Laurens, SC 29360

OR hand delivered to 100 Hillcrest Square, Administration

or emailed to: ARPA@co.laurens.sc.us

📎 Complete all questions using 11pt font or larger. **Use only the space provided on the application form.**

📎 Section II Financial Information must be completed on the form. **An attached financial statement or budget will not be accepted.**

📎 Applicants must be registered with the SC Secretary of State's Division of Public Charities. Nonprofit organizations need to include a copy of their confirmation letter of Secretary of State's Official Web site <http://www.scsos.com/> or call 803-734-1790.

📎 Before submitting your application, please check to ensure that you have included the following:

- your IRS Letter (if applicable),
- a list of officers, staff and board members,
- Completed application with all required signatures.
- a copy of your confirmation letter of registration from the SC Secretary of State's Division of Public Charities

No other attachments will be accepted.

This application is available on the County's website at www.laurenscounty.us.

ARPA

From: Jami Steifle (via Google Docs) <drive-shares-noreply@google.com>
Sent: Tuesday, March 1, 2022 11:35 AM
To: ARPA
Subject: Copy of 2022_ARPA_Grant_App_04_01_2022
Attachments: Copy of 2022_ARPA_Grant_App_04_01_2022.pdf

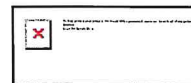
jsteifle@greenwoodsc.gov attached a document

jsteifle@greenwoodsc.gov has attached the following document:

8th Circuit Solicitor's Office Request for ARPA funds

 Copy of 2022_ARPA_Grant_App_04_01_2022

Google LLC, 1600 Amphitheatre Parkway, Mountain View, CA 94043, USA
You have received this email because jsteifle@greenwoodsc.gov shared a document with you from Google Docs.



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NOTE: This e-mail is a public record which may be subject to disclosure pursuant to the Freedom of Information Act, S.C. Code Ann. §§ 30-4-10 *et seq.*, to a person or party requesting the same.

