

South Carolina Department of Labor, Licensing and Regulation



110 Centerview Drive Post Office Box 11329 Columbia, SC 29211-1329 (803) 896-4300 Henry D. McMaster Governor

> Emily H. Farr Director

September 25, 2024

Mr. Ryan Eubanks, Fire Chief South Spartanburg Fire District 2639 Stone Station Road Roebuck, SC 29376

Dear Mr. Eubanks,

Your organization has been included in the South Carolina Department of Labor, Licensing and Regulation (LLR) FY 2024-25 Appropriations Act (H.5100) for a one-time, non-recurring appropriation of \$965,000 in State general funds.

To initiate the disbursement of funds, please complete the FY25 Earmarked Appropriations Disbursement Request form included with this communication. Proviso 117.21 requires LLR to obtain a plan for how the funds will be expended by the organization and how the expenditures will provide a public benefit before disbursing funds. Your organization must submit these items before disbursement. LLR may share the requested documentation with the Executive Budget Office via the Department of Administration and publish the documentation on our website pursuant to the Governor's Executive Order 2022-19.

Please email the requested documentation to appropriations.disbursements@llr.sc.gov by October 02, 2024, and include your programmatic and fiscal contacts' names, direct phone numbers, and email addresses. Upon receipt and review of the information provided, LLR will reach out with any questions before funds are disbursed.

If you have any additional questions, contact Pameco Suber at (803)-832-8304 or by email at appropriations.disbursements@llr.sc.gov.

Sincerely,



Brittany N. Hammond Chief Financial Officer

Request for Taxpayer Identification Number and Certification

Go to www.irs.gov/FormW9 for instructions and the latest information.

Befor	e you begin. For guidance related to the purpose of Form W-9, see Purpose of Form, below.	
	1 Name of entity/individual. An entry is required. (For a sole proprietor or disregarded entity, enter the owner's name or entity's name on line 2.)	line 1, and enter the business/disregarded
	Roebuck Fire District DBA South Spartanburg Fire District	
	2 Business name/disregarded entity name, if different from above.	
	Roebuck Fire District/Department, Croft Fire District/Department, South Spartanburg Fire	District
on page 3	3a Check the appropriate box for federal tax classification of the entity/individual whose name is entered on line 1. Chec only one of the following seven boxes.	certain entities, not individuals;
dud	Individual/sole proprietor C corporation S corporation Partnership Trust/estat	e see instructions on page 3):
as as	LLC. Enter the tax classification (C = C corporation, S = S corporation, P = Partnership)	Exempt payee code (if any)
Print or type. Instructions (Note: Check the "LLC" box above and, in the entry space, enter the appropriate code (C, S, or P) for the tax classification of the LLC, unless it is a disregarded entity. A disregarded entity should instead check the appropriate box for the tax classification of its owner.	Compliance Act (FATCA) reporting
E L		
P Specific	3b If on line 3a you checked "Partnership" or "Trust/estate," or checked "LLC" and entered "P" as its tax classification, and you are providing this form to a partnership, trust, or estate in which you have an ownership interest, check this box if you have any foreign partners, owners, or beneficiaries. See instructions	(Applies to accounts maintained outside the United States.)
See	5 Address (number, street, and apt. or suite no.). See Instructions. Requester's n	ame and address (optional)
0,	2639 Stone Station Rd	
	6 City, state, and ZIP code	
	Roebuck, SC 29376	
	7 List account number(s) here (optional)	

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

	 -	
	.L	

Note: If the account is in more than one name, see the instructions for line 1. See also What Name and Number To Give the Requester for guidelines on whose number to enter.

Part II Certification

Under penalties of perjury, I certify that:

- 1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
- 2. I am not subject to backup withholding because (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
- 3. I am a U.S. citizen or other U.S. person (defined below); and
- 4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and, generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Signature of U.S. person

Date	09/2	26/	202	4
	<u> </u>	/		

General Instr

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to *www.irs.gov/FormW*9.

What's New

Line 3a has been modified to clarify how a disregarded entity completes this line. An LLC that is a disregarded entity should check the appropriate box for the tax classification of its owner. Otherwise, it should check the "LLC" box and enter its appropriate tax classification. New line 3b has been added to this form. A flow-through entity is required to complete this line to indicate that it has direct or indirect foreign partners, owners, or beneficiaries when it provides the Form W-9 to another flow-through entity in which it has an ownership interest. This change is intended to provide a flow-through entity with information regarding the status of its indirect foreign partners, owners, or beneficiaries, so that it can satisfy any applicable reporting requirements. For example, a partnership that has any indirect foreign partners may be required to complete Schedules K-2 and K-3. See the Partnership Instructions for Schedules K-2 and K-3 (Form 1065).

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS is giving you this form because they

Statement of Non-Discrimination By Organizations Funded in the South Carolina General Appropriations Act

To meet requirements of a provision of the South Carolina General Appropriations Act regarding your funding, please fill in the blanks below, sign and return to LLR with your other credentials. If desired, you may retype the statement on your own letterhead.

Statement of Non-Discrimination
<u>09/26/2024</u> Date
ssurance is hereby given by the
Roebuck Fire District DBA South Spattanburg Fire District
(Name of Organization)

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.

Signature				
Title _ F	te C	hich	<i>y</i>	
		0		



Amount

Address

Tax ID#

Entity Type

City/State/Zip Website

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 and Executive Order 2022-19. This form must be submitted to the state agency providing the contribution for the designated organization. The state agency providing the contribution should use this form to collect information from the designated organization from the designated organization are the funds can be disbursed.

Contribution Information

Purpose

\$965,000.00 R360 - Department of Labor, Licensing, and Regulation Firefighter Safety and ADA Compliance
Organization Information
Entity Name Roebuck Fire District DBA South Spartanburg Fire District Contact Name Ryar

2639 Stone Station Rd

Special Purpose District

Roebuck, SC 29376

ssfire.org

State Agency Providing the Contribution

	Organization Contact Information
Contact Name	Ryan C Eubanks
Position/Title	Fire Chief
Telephone	
Email	

Plan/Accounting of how t	hese funds will	l be spent:
Description	Budget	Explanation
Firefighter Health and Safety Project	\$372,500.00	SCBA, SCBA Compressor/Fill, Diesel Exhaust Evac System, Station Alerting System
Community Engagement Project	\$388,000.00	Repair to Arkwright Station parking area, Improved ADA compliance at all stations
Firefighter Training and Education Project	\$98,500.00	EMT training program, multi-discipline training prop at Arkwright Station
Emergency Response Equipment Project	\$106,000.00	Purchase replacement firehose, purchase additional haz-mat equipment
Septim form		
Grand Total	\$965,000.00	

Concernence and the second second

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

FF Safety and Health -- (SCBA, Compressor and Fill) The fire district needs 'modern' SCBA, SCBA Compressor and Fill Station to have breathable air for environments that are immediately dangerous to life and health. (Diesel Exhaust Evac System) The fire district needs a diesel exhaust system at the Arkwright fire station to remove known carcinogens from the interior of the facility to provide for a clean breathing air for the personnel and citizens. (Station Alerting System). The fire district needs to improve the antiquated station alerting systems at all district stations. This improvement will better ensure that proper equipment ansd staffing are notifed quickly and appropriately. **Community Engagement--** (Repair of Arkwright fire station parking area). The parking area is in significant need of repair. These repairs will help ensure that the facility is more useable for the district and the citizens. (ADA Compliance Improvement). All of the district's fire stations have needs to improve upon their ability to comply with federal ADA guidelines for community facilities. Areas for improvement for addition or repair include ramps, rails, entryways/exitways and sink/restroom accessibility. **Firefighter Training and Education --** (EMT Training Program) The fire district recently completed a strategic plan. Delivery of EMT level medical response became a goal within the plan for operational improvement. The fire district our and offset salary improvement and offset salary improvement within special operational implementation by July 1, 2028. (Multi-discipline Training Prop). Also within our recent strategic plan, the goal for operational amprovement, the goal portunities in the areas of confined space rescue advanced rope systems, low angle rope systems, forcible entry, FF bailout drills, FF safety and survival, hose deployements, and ground ladders. **Emergency Response Equipment --** (Fire Hose). The fire district has immediate needs to replace haz-mat equipment. This equipment. The sequipment, product identifica

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.

Last	updated:	Auaust	2022



Printed Name		
Ferning ("The second seco		
ren	2.54 Sectors and the sector of the sector of the standard sectors and the sector of the sectors of the sector of the sectors of the sector	
and the forest the second s		
		The second

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
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, 2025.

Certifications of State Agency Providing Contribution

FIRE CHIEF Title 09/20/2024

3) State Agency certifies that it will make distributions directly to the organization.

RYAN C EUBANKS

Printed Name

Agency Head Signature

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, 2025.

Date

1) State Agency certifies that the planned expenditure aligns with the Agency's mission and/or the purpose specified in the appropriations act. 2) State Agency certifies that the Organization has set forth a public purpose to be served through receipt of the expenditure.



This form is designed to collect the quarterly and annual expenditure reports required by South Carolina in accordance with Proviso 117.21 of the appropriations act and Executive Order 2022-19. This form must be submitted to the state agency that is providing the contribution to the designation organization at the end of year quarter and by June 30, 2025.

Contribution Information

State Agency Providing the Contribution Amount \$965,000.00 R360 - Department of Labor, Licensing, and Regulation

Firefighter Safety and ADA Compliance

	Organization Information
Entity Name	Roebuck Fire District DBA South Spartanburg Fire District
Address	2639 Stone Station Rd
City/State/Zip	Roebuck, SC 29376
Website	ssfire.org
Tax ID#	
Entity Type	Special Purpose District

	Organizatio	n Contact Information
Name	Ryan C Eubanks	
Position/Title	Fire Chief	
Telephone		
Email		

Purpose

	Reporting Period	
Reporting Period		

Account	ting of how the f	unds have been	spent:				
Description				Expenditures			
(Attach additional detail for subgrantees and affiliated nonprofits)	Budget	Quarter 1	Quarter 2	Quarter 3	Quarter 4	Total	Balance
Firefighter Health and Safety Project	\$372,500.00	\$0.00				\$0.00	\$372,500.00
Community Engagement Project	\$388,000.00	\$0.00				\$0.00	\$388,000.00
Firefighter Training and Education Project	\$98,500.00	\$0.00				\$0.00	\$98,500.00
Emergency Response Equipment	\$106,000.00	\$0.00				\$0.00	\$106,000.00
						\$0.00	\$0.00
						\$0.00	\$0.00
						\$0.00	\$0.00
						\$0.00	\$0.00
						\$0.00	\$0.00
Grand Total	\$965,000.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$965,000.00

Explanation of any unspent funds (to be provided only if unspent funds remain at the end of the fiscal year):

Expenditure Certification

been expended in accordance with the Plan provided to the Agency Providing the Distribution and for a public purpose.

<u>Rynn CEubtwks</u> Printed Name

FIRE CHIEF Title 09/26/2024



This form is designed to collect the quarterly and annual expenditure reports required by South Carolina in accordance with Proviso 117.21 of the appropriations act and Executive Order 2022-19. This form must be submitted to the state agency that is providing the contribution to the designation organization at the end of year quarter and by June 30, 2025.

Contri	hution	Informat	ion
Conten		internet	

Amount State Agency Providing the Contribution \$965,000.00 R360 - Department of Labor, Licensing, and Regulation

Firefighter Safety and ADA Compliance

	Organization Information
Entity Name	Roebuck Fire District DBA South Spartanburg Fire District
Address	2639 Stone Station Rd
City/State/Zip	Roebuck, SC 29376
Website	ssfire.org
Tax ID#	
Entity Type	Special Purpose District

Name	Ryan C Eubanks
Position/Title	Fire Chief
Telephone	
Email	

Purpose

	Reporting Period	
Reporting Period	Quarter 1: July 1, 2024 - September 30, 2024	

Accoun	ting of how the f	unds have been	spent:				
Description		Tax and the second		Expenditures			
(Attach additional detail for subgrantees and affiliated nonprofits)	Budget	Quarter 1	Quarter 2	Quarter 3	Quarter 4	Total	Balance
Firefighter Health and Safety Project	\$372,500.00	\$0.00				\$0.00	\$372,500.00
Community Engagement Project	\$388,000.00	\$0.00				\$0.00	\$388,000.00
Firefighter Training and Education Project	\$98,500.00	\$0.00				\$0.00	\$98,500.00
Emergency Response Equipment	\$106,000.00	\$0.00				\$0.00	\$106,000.00
						\$0.00	\$0.00
						\$0.00	\$0.00
						\$0.00	\$0.00
						\$0.00	\$0.00
						\$0.00	\$0.00
Grand Total	\$965,000.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$965,000.00

Explanation of any unspent funds (to be provided only if unspent funds remain at the end of the fiscal year):

Expenditure Certification

d in accordance with the Plan provided to the Agency Providing the Distribution and for a public purpose.

Fire Chief Title 12/30/24

Ryan C Eubanks Printed Name

Date



This form is designed to collect the quarterly and annual expenditure reports required by South Carolina in accordance with Proviso 117.21 of the appropriations act and Executive Order 2022-19. This form must be submitted to the state agency that is providing the contribution to the designation organization at the end of year quarter and by June 30, 2025.

		Contribution Information
Amount	State Agency Providing the Contribution	Purpose
\$965,000.00	R360 - Department of Labor, Licensing, and Regulation	Firefighter Safety and ADA Compliance

	Organization Information
Entity Name	Roebuck Fire District DBA South Spartanburg Fire District
Address	2639 Stone Station Rd
City/State/Zip	Roebuck, SC 29376
Website	ssfire.org
Tax ID#	
Entity Type	Special Purpose District

Name	Ryan C Eubanks
Position/Title	Fire Chief
Telephone	
Email	

	Reporting Period
Reporting Period	Quarter 2: October 1, 2024 - December 30, 2024

Accounting of how the funds have been spent:							
Description	Budget	Expenditures					
(Attach additional detail for subgrantees and affiliated nonprofits)		Quarter 1	Quarter 2	Quarter 3	Quarter 4	Total	Balance
Firefighter Health and Safety Project	\$372,500.00	\$0.00	\$68,216.00			\$68,216.00	\$304,284.00
Community Engagement Project	\$388,000.00	\$0.00	\$0.00			\$0.00	\$388,000.00
Firefighter Training and Education Project	\$98,500.00	\$0.00	\$0.00			\$0.00	\$98,500.00
Emergency Response Equipment	\$106,000.00	\$0.00	\$0.00			\$0.00	\$106,000.00
						\$0.00	\$0.00
						\$0.00	\$0.00
						\$0.00	\$0.00
						\$0.00	\$0.00
						\$0.00	\$0.00
Grand Total	\$965,000.00	\$0.00	\$68,216.00	\$0.00	\$0.00	\$68,216.00	\$896,784.00

Explanation of any unspent funds (to be provided only if unspent funds remain at the end of the fiscal year) :

Expenditure Certification

e been expended in accordance with the Plan provided to the Agency Providing the Distribution and for a public purpose.

Fire Chief Title 12/30/24

Date

Ryan C Eubanks

Printed Name



This form is designed to collect the quarterly and annual expenditure reports required by South Carolina in accordance with Proviso 117.21 of the appropriations act and Executive Order 2022-19. This form must be submitted to the state agency that is providing the contribution to the designation organization at the end of year quarter and by June 30, 2025.

		Contribution Information		
Amount	State Agency Providing the Contribution		Purpose	
\$965,000.00	R360 - Department of Labor, Licensing, and Regulation	Firefighter Safety and ADA Compliance		

Organization Information			
Entity Name	Roebuck Fire District DBA South Spartanburg Fire District		
Address	2639 Stone Station Rd		
City/State/Zip	Roebuck, SC 29376		
Website	ssfire.org		
Tax ID#			
Entity Type	Special Purpose District		

Name	Ryan C Eubanks
Position/Title	Fire Chief
Telephone	
Email	

	Reporting Period
Reporting Period	Quarter 3: January 1, 2025 - March 31, 2025

Accounting of how the funds have been spent:							
Description		Expenditures					
(Attach additional detail for subgrantees and affiliated nonprofits)	Budget	Quarter 1	Quarter 2	Quarter 3	Quarter 4	Total	Balance
Firefighter Health and Safety Project	\$372,500.00	\$0.00	\$68,216.00	\$214,634.88		\$282,850.88	\$89,649.12
Community Engagement Project	\$388,000.00	\$0.00	\$0.00	\$106,938.50		\$106,938.50	\$281,061.50
Firefighter Training and Education Project	\$98,500.00	\$0.00	\$0.00	\$8,143.00		\$8,143.00	\$90,357.00
Emergency Response Equipment	\$106,000.00	\$0.00	\$0.00	\$16,697.89		\$16,697.89	\$89,302.11
	\$100,000.00					\$0.00	\$0.00
						\$0.00	\$0.00
						\$0.00	\$0.00
						\$0.00	\$0.00
						\$0.00	\$0.00
Grand Total	\$965,000.00	\$0.00	\$68,216.00	\$346,414.27	\$0.00	\$414,630.27	\$550,369.73

Explanation of any unspent funds (to be provided only if unspent funds remain at the end of the fiscal year):

Expenditure Certification

ve been expended in accordance with the Plan provided to the Agency Providing the Distribution and for a public purpose.

Fire Chief Title 3/28/25

Ryan C Eubanks

Printed Name

Signature

Date