<u>E</u> State of South Carolina Contribution Expenditure Report 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 of 2022 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, 2023. **Contribution Information** Amount State Agency Providing the Contribution Purpose \$500,000 X220 - Aid to Subdivisions - Treasurer Funds will be use to Maintain the Community Center and keep scheduled but needed programs running. **Organization Information Organization Contact Information** Entity Name Citizens Improvement Committee Name Bertha S. Middleton Address P O Box 46 Position/Title Volunteer Wadmalaw Island, SC 29487 843-557-8408 City/State/Zip Telephone https://www.facebook.com/profile.php? ids=100064825086046 wicic5605@gmail.com Website Email Secondary Organization Contact Information 57-0695049 Tax ID# Nonprofit Organization Name Debra Commodore Entity Type Position/Title Secretary 843-807-2911 **Reporting Period** Telephone Reporting Period Quarter 4: April 1, 2024 - June 30, 2024 dcwash6@outlook.com Email Accounting of how the funds have been spent: Expenditures FY23 Total Quarter 1 Quarter 2 Quart Description Quarter 4 nr 2

| Description   | Budget       | FT25 IOLAI | Quarter 1   | Quarter 2    | Quarter 5   | Quarter 4   | TOLAI        | Dalance      |
|---|--------------|------------|-------------|--------------|-------------|-------------|--------------|--------------|
| Building major repairs  | \$175,000.00 | \$0.00     | \$65,429.18 | \$69,673.25  | \$3,250.00  | \$0.00      | \$138,352.43 | \$36,647.57  |
| Helping seniors and Veterans with minor and major home repairs              | \$150,000.00 | \$0.00     | \$6,100.00  | \$5,334.00   | \$2,000.00  | \$2,000.00  | \$15,434.00  | \$134,566.00 |
| Stipend for Project Manager, gas allowance for senior volunteers            | \$75,000.00  | \$0.00     | \$5,600.00  | \$8,600.00   | \$4,500.00  | \$7,500.00  | \$26,200.00  | \$48,800.00  |
| Monthly -general expenses x 12  | \$11,815.00  | \$0.00     | \$2,857.02  | \$3,874.00   | \$4,050.00  | \$1,034.00  | \$11,815.02  | -\$0.02      |
| Food Pantry and Blessing box provides non perishable for those in need -x12 | \$38,185.00  | \$0.00     | \$459.02    | \$696.00     | \$1,619.95  | \$2,592.00  | \$5,366.97   | \$2,010.00   |
| Van (handicap)for transporting seniors to appointments, activities          | \$50,000.00  | \$0.00     | \$0.00      | \$47,000.00  | \$495.00    | \$495.00    | \$47,990.00  | \$0.00       |
|   |              |            |             |              |             |             | \$0.00       |              |
|   |              |            |             |              |             |             | \$0.00       | \$0.00       |
|   |              |            |             |              |             |             | \$0.00       | \$0.00       |
| Grand Total   | \$500.000.00 | \$0.00     | \$80,445,22 | \$135,177,25 | \$15,914,95 | \$13.621.00 | \$245,158,42 | \$222.023.55 |

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

We have a big project to complete, contractor's bid already accepted we're just waiting for them to get back to us.

## Expenditure Certification

| The Organization certifies that the funds have been expended in accordance with the Plan provided to the Agency Providing the Distribution and for a public purpose. |                             |  |          |  |  |  |  |  |  |  |
|--|-----------------------------|--|----------|--|--|--|--|--|--|--|
|  |                             |  |          |  |  |  |  |  |  |  |
| Bertha s Middlet   | Berlha s Middleton Director |  |          |  |  |  |  |  |  |  |
| Signature  |                             |  | Title    |  |  |  |  |  |  |  |
| Bertha s Middleton   | ı                           |  | 10-24-24 |  |  |  |  |  |  |  |
| Printed Name   |                             |  | Date     |  |  |  |  |  |  |  |