



### 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
\$350,000.00	X220 - Aid to Subdivisions - Treasurer	Aynor Town Park Improvements

#### Organization Information

Entity Name	Town of Aynor
Address	PO Box 66/ 600 S Main St
City/State/Zip	Aynor SC 29511
Website	townofaynor.net
Tax ID#	57-6006209
Entity Type	Municipality

#### Organization Contact Information

Name	Laurie Smith
Position/Title	Town Clerk
Telephone	843-358-6231
Email	townofaynor@sccoast.net

#### Reporting Period

Reporting Period	Quarter 2: October 1, 2022 - December 30, 2022
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#### Accounting of how the funds have been spent:

Description	Budget	Expenditures					Total	Balance
		Quarter 1	Quarter 2	Quarter 3	Quarter 4			
Demolition of existing features	\$25,000.00	\$0.00	\$0.00			\$0.00	\$25,000.00	
Construction of restrooms	\$150,000.00	\$0.00	\$0.00			\$0.00	\$150,000.00	
Playground Equipment	\$125,000.00	\$0.00	\$0.00			\$0.00	\$125,000.00	
Playground Covering material(s)	\$50,000.00	\$0.00	\$0.00			\$0.00	\$50,000.00	
						\$0.00	\$0.00	
						\$0.00	\$0.00	
						\$0.00	\$0.00	
						\$0.00	\$0.00	
						\$0.00	\$0.00	
						\$0.00	\$0.00	
<b>Grand Total</b>	<b>\$350,000.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$350,000.00</b>	

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

#### 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.

Laurie Smith  
 \_\_\_\_\_  
 Signature  
 Laurie Smith  
 \_\_\_\_\_  
 Printed Name

Town Clerk  
 \_\_\_\_\_  
 Title  
 1/21/2023  
 \_\_\_\_\_  
 Date