

## 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 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, 2024.

Contribution Information					
Amount	State Agency Providing the Contribution	Purpose			
\$100,000		Orangeburg County - County Marketing			

Organization Information				
Entity Name	County of Orangeburg			
Address	P.O. Drawer 9000			
City/State/Zip	Orangeburg, S.C. 29116			
Website	www.orangeburgcounty.org			
Tax ID#	57-6000775			
Entity Type	County			

	Organization Contact Information				
Name Angel Howell					
Position/Title	Administrative Services Division Director				
Telephone	803-533-6101				
Email	ahowell@orangeburgcounty.org				
Secondary Organization Contact Information					
Name	Kendeana Stephens				
Position/Title	Executive Asst to County Administrator/ Sp. Projects Admin				
Telephone	803-533-6101				
Email	kstephens@orangeburgcounty.org				

Reporting Period					
	Reporting Period	Quarter 4: April 1, 2024 - June 30, 2024			

Accounting of how the funds have been spent:									
Description									
(Attach additional detail for subgrantees and affiliated nonprofits)	Budget	Quarter 1	Quarter 2	Quarter 3	Quarter 4	Total	Balance		
County Marketing	\$100,000.00	\$0.00	\$21,608.00	\$73,392.00	\$5,000.00	\$100,000.00	\$0.00		
						\$0.00	\$0.00		
						\$0.00	\$0.00		
						\$0.00	\$0.00		
						\$0.00	\$0.00		
						\$0.00	\$0.00		
						\$0.00	\$0.00		
						\$0.00	\$0.00		
						\$0.00	\$0.00		
Grand Total	\$100,000.00	\$0.00	\$21,608.00	\$73,392.00	\$5,000.00	\$100,000.00	\$0.00		

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.

7 Signature Harold M. Young

Printed Name

County Administrator

Title

7/15/2024

Date