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, 2026.

Contribution Information

Amount	State Agency Providing the Contribution	Purpose
$1,000,000	X220 - Aid to Subdivisions - Treasurer	Bishopville Depot Renovation & Community Health and Wellness Center $1,000,000.00

Organization Information	
Entity Name	City of Bishopville
Address	135 E Church Street
City/State/Zip	Bishopville SC 29010
Website	cityofbishopvillesc.com
Tax ID#	57-6001001
Entity Type	Municipality

Reporting Period	
Reporting Period	Quarter 1: July 1, 2025 - September 30, 2025

Organization Contact Information	
Name	Brittany Hyman
Position/Title	Assistant City Administrator
Telephone	803-484-5948
Email	brittanyhyman@cityofbishopville.org
Secondary Organization Contact Information	
Name	Gregg McCutchen III
Position/Title	Assistant City Administrator
Telephone	803-484-5948
Email	wgmbishopville@yahoo.com

Accounting of how the funds have been spent:

Description	Budget	Expenditures						Balance
		FY25 Total	Quarter 1	Quarter 2	Quarter 3	Quarter 4	Total	
Licensing and permits for designers, engineers, contractors	$15,000.00	$0.00	$0.00				$0.00	$15,000.00
Marketing the wellness center and depot	$5,000.00	$0.00	$0.00				$0.00	$5,000.00
Landscaping and grounds improvement	$100,000.00	$0.00	$0.00				$0.00	$100,000.00
Insurance cost for renovating depot and wellness center	$30,000.00	$0.00	$0.00				$0.00	$30,000.00
Updating bathrooms, offices, HVAC	$200,000.00	$0.00	$0.00				$0.00	$200,000.00
Getting utilities in place	$10,000.00	$0.00	$0.00				$0.00	$10,000.00
Sidewalks and fountain installation	$150,000.00	$0.00	$0.00				$0.00	$150,000.00
All Equipment necessary for wellness center	$325,000.00	$0.00	$0.00				$0.00	$325,000.00
All other supplies for both locations	$165,000.00	$0.00	$0.00				$0.00	$165,000.00
Grand Total	**$1,000,000.00**	**$0.00**	**$0.00**	**$0.00**	**$0.00**	**$0.00**	**$0.00**	**$1,000,000.00**

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

The wellness center permits are being obtained- work will begin shortly.

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.

W. Gregg McCutchen III
Signature

W. Gregg McCutchen, III
Printed Name

City Administrator
Title

10-20-25
Date