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
$400,000	E160 - State Treasurer	Nix Stilton Community Center

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

Reporting Period	
Reporting Period	Quater 2: October 1, 2024 - December 31, 2024

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 Adm
Telephone	803-533-6101
Email	kstephens@orangeburgcounty.org

Accounting of how the funds have been spent:

Description (Attach additional detail for subgrantees and affiliated nonprofits)	Budget	Expenditures						Balance
		FY24	Quarter 1	Quarter 2	Quarter 3	Quarter 4	Total	
Site Development	$400,000.00	$6,488.60	$0.00	$0.00			$6,488.60	$393,511.40
							$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	**$400,000.00**	**$6,488.60**	**$0.00**	**$0.00**	**$0.00**	**$0.00**	**$6,488.60**	**$393,511.40**

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.

Signature

Marion K. Lloyd
Printed Name

Acting County Administrator
Title

1/3/2025
Date