

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	National State of the Control of the		
\$90,000 X220 - Aid to Subdivisions - Treasurer		Marion Garden Club Beautification Projects; Francis Marion Plaza Project			

Organization Information				
Entity Name	City of Marion			
Address	PO Box 1190			
City/State/Zip	Marion, SC 29571			
Website	www.marionsc.gov			
Tax ID#	57-6001075			
Entity Type	Municipality			

Reporting Period						
Reporting Period	Quarter 3: January 1, 2024 - March 31, 2024					

	Organization Contact Information
Name	Patricia Brown
Position/Title	City Treasurer
Telephone	843-423-5961
Email	pbrown@marionsc.gov
	Secondary Organization Contact Information
Name	Elizabeth Gray
Position/Title	Purchasing Director
Telephone	843-423-8614
Email	egray@marionsc.gov

Accounting of how the funds have been spent:								
		Expenditures				XIII TO THE RESIDENCE OF		
Description	Budget	FY23 Total	Quarter 1	Quarter 2	Quarter 3	Quarter 4	Total	Balance
Marion Garden Club Beautification Projects	\$50,000.00	\$2,270.15	\$4,431.92	\$289.39	\$3,225.00		\$10,216.46	\$39,783.54
Francis Marion Plaza Project	\$40,000.00	\$18,840.34	\$151.19	\$300.00	\$0.00		\$19,291.53	\$20,708.47
							\$0.00	\$0.00
							\$0.00	\$0.00
							\$0.00	\$0.00
		31100					\$0.00	\$0.00
							\$0.00	\$0.00
							\$0.00	\$0.00
		W- 200 13					\$0.00	\$0.00
Grand Total	\$90,000.00	\$21,110.49	\$4,583.11	\$589.39	\$3,225.00	\$0.00	\$29,507.99	\$60,492.01

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

Francisco all'Arress	Cortification

The Organization certifies that the funds ha	ve been expended in accordance with	the Plan provided to the Agency	Providir	ng the Distribution	and for a public purpose.

Clyaieth Gray Signature Elizabeth Gray

Printed Name

Purchasing Director
Title
3/27/2024
Date