



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
\$500,000	X220 - Aid to Subdivisions - Treasurer	Downtown Revitalization

Organization Information

Entity Name	Town of Winnsboro
Address	207 N. Congress Street
City/State/Zip	Winnsboro, SC 29180
Website	www.townofwinnsboro.com
Tax ID#	57-6001128
Entity Type	Municipality

Organization Contact Information

Name	Cynthia Gawronski
Position/Title	Grant Administrator
Telephone	(803) 815-2947
Email	cyndi.gawronski@townofwinnsboro.sc.gov
Secondary Organization Contact Information	
Name	Christopher Clauson
Position/Title	Asst. Town Manager
Telephone	803.635.6364
Email	chrisclauson@truvista.net

Reporting Period

Reporting Period	Quarter 3: January 1, 2024 - March 31, 2024
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Accounting of how the funds have been spent:

Description	Budget	Expenditures						Balance
		FY23 Total	Quarter 1	Quarter 2	Quarter 3	Quarter 4	Total	
Purchase dilapidated bldgs in Winnsboro Downtown Business District	\$100,000.00	\$0.00	\$0.00		\$10,152.00		\$10,152.00	\$89,848.00
Upfit of buildings to create speculative retail space	\$350,000.00	\$0.00	\$0.00		\$5,000.00		\$5,000.00	\$345,000.00
Site improvements (if necessary) for Accessibility & Safety Purposes	\$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
Grand Total	\$500,000.00	\$0.00	\$0.00	\$0.00	\$15,152.00	\$0.00	\$15,152.00	\$484,848.00

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.


 Signature
 Cyndi Gawronski
 Printed Name

Grant Administrator
 Title
 4/15/2024
 Date