



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, 2025.

Contribution Information

Amount	State Agency Providing the Contribution	Purpose
\$300,000.00	J020 - Department of Health and Human Services	Support of Non-profit for Community Programs/ Opioid Addiction Treatment

Organization Information

Entity Name	Community Wellness Outreach
Address	7356 Garners Ferry Rd Ste 130
City/State/Zip	Columbia, SC 29209
Website	N/A
Tax ID#	86-3673280
Entity Type	Nonprofit Organization

Organization Contact Information

Name	Kenneth Simmons
Position/Title	Program Director
Telephone	(803) 586-1752
Email	K12sims@gmail.com

Reporting Period

Reporting Period	Quarter 1: July 1, 2024 - September 30, 2024
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Accounting of how the funds have been spent:

Description (Attach additional detail for subgrantees and affiliated nonprofits)	Budget	Expenditures				Total	Balance
		Quarter 1	Quarter 2	Quarter 3	Quarter 4		
Community Health Fair/Education	\$50,000.00					\$0.00	\$50,000.00
Annual Opioid Addiction Conference/Seminar	\$30,000.00					\$0.00	\$30,000.00
Uninsured/Underinsured/Insured Addiction Operation Save Lives Treat Prog	\$30,000.00					\$0.00	\$30,000.00
Supplies/Equipment/Marketing	\$35,000.00					\$0.00	\$35,000.00
Healthy Life Style/Wellness/Naloxone Education and Distribution	\$25,000.00					\$0.00	\$25,000.00
Transportation	\$20,000.00					\$0.00	\$20,000.00
Support Groups	\$20,000.00					\$0.00	\$20,000.00
Rent	\$15,000.00					\$0.00	\$15,000.00
Special Projects Payroll	\$75,000.00					\$0.00	\$75,000.00
Grand Total	\$300,000.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$300,000.00

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

FY25 Funds have not been received as of September 30th, 2024.

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
Kenneth Simmons

Title
Director
Date
8-25-2025



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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, 2025.

Contribution Information

Amount	State Agency Providing the Contribution	Purpose
\$300,000.00	JD20 - Department of Health and Human Services	Support of Non-profit for Community Programs/ Opioid Addiction Treatment

Organization Information

Entity Name	Community Wellness Outreach
Address	7356 Garners Ferry Rd Ste 130
City/State/Zip	Columbia, SC 29209
Website	N/A
Tax ID#	86-3673280
Entity Type	Nonprofit Organization

Organization Contact Information

Name	Kenneth Simmons
Position/Title	Program Director
Telephone	(803) 586-1752
Email	K12sims@gmail.com

Reporting Period

Reporting Period	Quarter 2: October 1, 2024 - December 30, 2024
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Accounting of how the funds have been spent:

Description (Attach additional detail for subgrantees and affiliated nonprofits)	Budget	Expenditures				Total	Balance
		Quarter 1	Quarter 2	Quarter 3	Quarter 4		
Community Health Fair/Education	\$50,000.00					\$0.00	\$50,000.00
Annual Opioid Addiction Conference/Seminar	\$30,000.00					\$0.00	\$30,000.00
Uninsured/Underinsured/Insured Addiction Operation Save Lives Treat Prog	\$30,000.00					\$0.00	\$30,000.00
Supplies/Equipment/Marketing	\$35,000.00					\$0.00	\$35,000.00
Healthy Life Style/Wellness/Naloxone Education and Distribution	\$25,000.00					\$0.00	\$25,000.00
Transportation	\$20,000.00					\$0.00	\$20,000.00
Support Groups	\$20,000.00					\$0.00	\$20,000.00
Rent	\$15,000.00					\$0.00	\$15,000.00
Special Projects Payroll	\$75,000.00					\$0.00	\$75,000.00
Grand Total	\$300,000.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$300,000.00

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

FY25 Funds pending receipt as December 24th and not received. Awaiting fully cleared funding and executed deposit January 2025.

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
Kenneth Simmons

Title
Director
Date
2-25-2025