



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

Organization Information

Entity Name	Cancer Association of Anderson
Address	215 E. Calhoun Street
City/State/Zip	Anderson, SC 29621
Website	www.CAAnderson.org
Tax ID#	54-2098883
Entity Type	Nonprofit Organization

Organization Contact Information

Name	Angela Stringer
Position/Title	Executive Director
Telephone	864.634.4221
Email	Angela@CAAnderson.org

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					Balance
		Quarter 1	Quarter 2	Quarter 3	Quarter 4	Total	
Funds received on December 16, 2024	\$850,000.00					\$0.00	\$850,000.00
						\$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	\$0.00
Grand Total	\$850,000.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$850,000.00

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.

Angela Stringer
Signature
Angela Stringer
Printed Name

Executive Director
Title
1/10/2025
Date