

Amount

J020 - Department of Health and Human Services

## 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

Purpose	State Agency Providing the Contribution
Contribution Information	
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, 20	2022-19. This form must be submitted to the state agency that is providing the contribution to the designation organization

Develop and implement initiatives to meet the needs of people in our target area

	Organization Information
Entity Name	Reedy Fork Center For Community Development
Address	3115 Fork Shoals Rd
City/State/Zip	Simpsonville, SC 29680
Website	reedyforkccd.org
Tax ID#	31-1660034
Entity Type	Nonprofit Organization

	Organization Contact Information
Name	Thomas E. Simmons
Position/Title President	President
Telephone	864-275-4747
Email	thomas@reedyforkbaptist.org

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Description			Expenditures			
es and affiliated nonprofits) Budget	Quarter 1 Qu	Quarter 2	Quarter 3	Quarter 4	Total	Balance
\$99,800.00	\$69,961.98	\$6,238.52	\$407.76		\$76,608.26	\$23,191.74
ative	\$0.00	\$0.00			\$0.00	\$15,000.00
nitiative \$15,000.00	\$3,005.20	\$0.00			\$3,005.20	\$11,994.80
\$20,000.00	\$2,368.48	\$452.41			\$2,820.89	\$17,179.11
rogram \$25,000.00	\$10,688.04	\$0.00	\$3,998.42		\$14,686.46	\$10,313.54
Career Readiness \$15,000.00	\$0.00	\$0.00			\$0.00	\$15,000.00
\$10,200.00	\$1,700.00	\$2,550.00	\$2,550.00		\$6,800.00	\$3,400.00
					\$0.00	\$0.00
					\$0.00	\$0.00
Grand Total \$200,000.00 \$87,723.70		¢0 3/0 02	\$6.956.18	\$0.00	\$0.00 \$103,920.81	\$96,079.19

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

Thomas E. Simmons

Printed Name

President

Date