FY 2018-19 Bank Account and Transparency Accountability Report

Pursuant to Proviso 117.82 of the FY2019-20 Appropriations Act

Agency Name/Number: Account Name: Purpose of Account:			SCDPS / K050 GENERAL COUNSEL GENERAL COUNSEL FILING FEES	
Exemption Requested: If exemption is requested,	reason:	Yes		No X
Exemption Approved in Prior Year:		Yes		No X
Authorized Personnel Check Writing/Withdrawa				
Name: Title	Pam Jennings Accounts Payable Supervisor			
Name: Title:	Susan Terry Administrative Assistant			
Reconciliation: Name: Title	Jasmine Douglas Revenue Accountant			
Name: Title:	Jimmy Boland Accounting Manager			
Financial Information				
Beginning Balance at July 1, 2018:				300.00
Detailed Transactions Dur Deposits (Please list each de	ing FY 2018-2019: posit separately. Add lines as ne	eeded.)		
Date	Amount		Source	
Withdrawals: (Please list each withdrawal separately. Add lines as needed)				
Date	Amount		Payee	Description of Goods/Services Purchase

Ending Balance at June 30, 2019:

300.00