

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 K050 - Department of Public Safety		Marion County Communications Necessities and Equipment				

Organization Information					
Entity Name	Marion County Sheriff's Office				
Address	1811 North Highway 501 Bypass				
City/State/Zip	Marion, SC 29571				
Website	marionsc.org				
Tax ID#	57-6000384				
tity Type	County				

	Organization Contact Inf	ormation
Name	J. Brian Wallace	
Position/Title	Sheriff	
Telephone	843-423-8216	RECEIVE
Email	bwallace@marionsc.org	

JAN 27 2025

Highway Safety Accounting

Reporting Period						
Reporting Period	Quarter 2: October 1, 2024 - December 30, 2024					

Accounting	ng of how the f	funds have bee	n spent		A POPUL		
Description		Expenditures					
(Attach additional detail for subgrantees and affiliated nonprofits)	Budget	Quarter 1	Quarter 2	Quarter 3	Quarter 4	Total	Balance
Handheld Radios-Carry Forward for FY 25	-\$1,051.09	\$0.00	\$0			\$0.00	-\$1,051.09
Side by Side Utility Vehicle with Upfit-carry forward for FY25	\$814.47	\$0.00	40			\$0.00	\$814.47
Side by Side Utility Vehicle with Upfit-carry forward for FY25	\$2,249.34	\$0.00	40			\$0.00	\$2,249.34
						\$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	\$2,012.72	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$2,012.72

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

Expend		

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

J. Brian Wallace

Printed Name

Sheriff

Title

1/8/2024

Date