



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
\$500,000.00	K050 - Department of Public Safety	Historic Downtown Safety Upgrades

Organization Information

Entity Name	City of Fountain Inn
Address	200 N. Main Street
City/State/Zip	Fountain Inn SC 29644
Website	https://www.fountaininn.org
Tax ID#	57-6001034
Entity Type	Municipality

Organization Contact Information

Name	Russell Slatton
Position/Title	Assistant City Administrator
Telephone	(864)862-6474
Email	russell.slatton@fountaininn.org

Reporting Period

Reporting Period	Quarter 4: April 1, 2025 - June 30, 2025
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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	
Safety Upgrades	\$429,474.62	\$0.00	\$0.00	\$0.00	\$26,950.00	\$26,950.00	\$402,524.62
						\$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	\$429,474.62	\$0.00	\$0.00	\$0.00	\$26,950.00	\$26,950.00	\$402,524.62

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

The project is ongoing and was carried over from last 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

Russell A. Slatton

Printed Name

Assistant City Administrator

Title

11-Jun-25

Date