



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, 2024.

Contribution Information		
Amount	State Agency Providing the Contribution	Purpose
\$300,000.00	K050 - Department of Public Safety	Training Upgrades

Organization Information	
Entity Name	Clarendon County Sheriff's Office
Address	411 Sunset Drive
City/State/Zip	Manning, SC 29102
Website	www.clarendoncountygov.org
Tax ID#	57-6000337
Entity Type	County

Organization Contact Information	
Name	Timothy W. Baxley
Position/Title	Sheriff, Clarendon County
Telephone	8030435-4414
Email	Timothy W. Baxley

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JUN 06 2024

Highway Safety Accounting

Reporting Period	
Reporting Period	Quarter 4: April 1, 2024 - June 30, 2024

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	
Training upgrades	\$300,000.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$300,000.00
						\$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	\$300,000.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$300,000.00

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

There was a delay in getting an MOU between the City of Manning and the County which has been resolved. Purchase of the moving targets is pending approval of the Engineers drawings/specs: the building will be constructed within the next 6 months.

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

Printed Name

Title

Date