

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		Marion County Training Facility	

	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
Cntity Type	County

	Organization Contact Information	
Name	J. Brian Wallace	
Position/Title	Sheriff	ECRIMA
Telephone	843-423-8216	DUDIVE
Email	bwallace@marionsc.org	
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Highway Safety Accounting

Reporting Period				
Reporting Period	Quarter 3: January 1, 2025 - March 31, 2025			

Account	ing of how the f	unds have bee	en spent:		Silver and the second	A TOTAL ST	String & # H
Description	Budget	Expenditures					
(Attach additional detail for subgrantees and affiliated nonprofits)		Quarter 1	Quarter 2	Quarter 3	Quarter 4	Total	Balance
Marion County Training Facility	\$500,000.00	\$0.00	\$0	\$0		\$0.00	\$500,000.00
						\$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	\$500,000.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$500,000.00

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

Expenditure	Certification
Experialitare	CCITITICATION

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
4/10/2025
Date