

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		
\$1,250,000.00	K050 - Department of Public Safety	Acquisition of a mobile incident command vehicle		

Organization Information				
Entity Name	Berkeley County Sheriff's Office			
Address	223 N. Live Oak Drive			
City/State/Zip	Moncks Corner, SC 29461			
Website	https://sheriff.berkeleycountysc.gov			
Tax ID#	57-6000312			
Entity Type	County			

Organization Contact Information				
Name	S. Duane Lewis			
Position/Title	Sheriff			
Telephone	843-719-4994			
Email	duane.lewis@berkeleycountysc.gov			

Reporting Period					
Reporting Period	Quarter 4: April 1, 2025 - June 30, 2025				

Accounting of how the funds have been spent:							
Description		Expenditures					
(Attach additional detail for subgrantees and affiliated nonprofits)	Budget	Quarter 1	Quarter 2	Quarter 3	Quarter 4	Total	Balance
	\$1,250,000.00	\$0.00				\$0.00	\$1,250,000.00
25% Deposit			\$310,535.25			\$310,535.25	-\$310,535.25
				\$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 Tota	\$1,250,000.00	\$0.00	\$310,535.25	\$0.00	\$0.00	\$310,535.25	\$939,464.75

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

The project is on track for completion by the end of the the 2nd quarter or the beginning of the 3rd quarter of 2026. We plan to expend the funded balance in the next 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
S. Duane Lewis
Printed Name

Sheriff
Title

Data

Date