

## 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			
\$1,500,000.00 K050 - Department of Public Safety		Capital Projects				

	Organization Information
Entity Name	Town of Yemassee
Address	101 Town Cir
City/State/Zip	Yemassee, SC 29945-3363
Website	https://www.townofyemassee.org
Tax ID#	57-0476505
ntity Type	Municipality

	Organization Contact Information	
Name	Gregory Z. Alexander	
Position/Title	Police Chief	
Telephone	843-812-9502	
Email	galexander@townofyemassee.org	L

FEB 27 2025

Highway Safety Accounting

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

Accou	nting of how the f	unds have bee	en spent:				
<b>Description</b>		Expenditures		HOLD THE			
(Attach additional detail for subgrantees and affiliated nonprofits)	Budget	Quarter 1	Quarter 2	Quarter 3	Quarter 4	Total	Balance
Capital Projects	\$1,500,000.00					\$0.00	\$1,500,000.00
Upfitting for newly purchases vehicles (Radios, Lights/Sirens, Computer)			\$15,521.27			\$15,521.27	-\$15,521.27
Replacement motor for older police vehicle			\$11,253.03			\$11,253.03	
Purchase of two (2) 2023 Dodge Charger Police Vehicles			\$132,260.73			\$132,260.73	
						\$0.00	\$0.00
						\$0.00	\$0.00
						\$0.00	\$0.00
						\$0.00	\$0.00
						\$0.00	\$0.00
Grand Tot	al \$1,500,000.00	\$0.00	\$159,035.03	\$0.00	\$0.00	\$159,035.03	\$1,340,964.97

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

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EX.	pena	iture:	certii	ication

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

PIN

Date

Submitted by: Matthew E. Garro, Town Administrate 021220 Med Es