



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
\$100,000.00	P280 - Department of Parks, Recreation, and Tourism	Slater Hall Rehabilitation

Organization Information

Entity Name	Greenville County Parks, Recreation and Tourism
Address	4806 Old Spartanburg Rd
City/State/Zip	Taylors, SC 29687
Website	greenvillerec.com
Tax ID#	7000160186
Entity Type	County

Organization Contact Information

Name	Ty Houck
Position/Title	Manager of Greenways, Natural and Historic Resources
Telephone	864.331.9631
Email	thouck@greenvillecounty.org

Reporting Period

Reporting Period	Quarter 3: January 1, 2024 - March 31, 2024
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Accounting of how the funds have been spent:

Description	Budget	Expenditures					Balance
		Quarter 1	Quarter 2	Quarter 3	Quarter 4	Total	
(Attach additional detail for subgrantees and affiliated nonprofits)							
Architectural and Engineering design services	\$100,000.00	\$0.00	\$0.00	\$32,353.69		\$32,353.69	\$67,646.31
						\$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
						\$0.00	\$0.00
Grand Total	\$100,000.00	\$0.00	\$0.00	\$32,353.69	\$0.00	\$32,353.69	\$67,646.31

Explanation of any unspent funds (to be provided only if unspent funds remain at the end of the 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

Ty Houck

Printed Name _____

Manager of Greenways, Natural

Title

3/22/2024

Date _____