

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					
	P280 - Department of Parks, Recreation, and Tourism	TO SAVE THE CRITICALLY ENDANGERED SC HERITAGE HORSE ON DAUFUSKIE ISLAND					

Organization Information					
Entity Name	DAUFUSKIE MARSH TACKY SOCIETY				
Address	281 OLD HAIG POINT RD				
City/State/Zip	DAUFUSKIE ISLAND, SC 29915				
Website	DAUFUSKIEMARSHTACKYSOCIETY.ORG				
Tax ID#	47-4941635				
Entity Type	Nonprofit Organization				

Organization Contact Information					
Name	ERICA VEIT				
Position/Title	FOUNDER / EXEC DIRECTOR				
Telephone	843-290-9119				
Email	ERICA@DAUFUSKIEMARSHTACKYSOCIETY.ORG				

Reporting Period							
Reporting Period	Quarter 3: January 1, 2024 - March 31, 2024						

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				
VIDEO SURVEILLANCE, ADVERTISING/MARKETING, FACILITIES IMPROVEMENTS	\$20,000.00	\$8,810.00				\$8,810.00	\$11,190.00				
PASSIVE PARK MARSH TACKY TOUR & WALKING TRAIL, HORSE FACILITIES IMPRO			\$10,224.00			\$10,224.00	-\$10,224.00				
						\$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	\$20,000.00	\$8,810.00	\$10,224.00	\$0.00	\$0.00	\$19,034.00	\$966.00				

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
ERICA M VEIT
Printed Name

FOUNDER & EXEC DIRECTOR

Title

06-28-2024

Date