

State of South Carolina Fiscal Year Spending Report

This form is designed to collect the information required by South Carolina in accordance with Proviso 117.21 of the appropriations act of 2022 and Executive Order 2022-19. This form must be submitted to the state agency that is providing the contribution for the designated organization. The state agency providing the contribution should use this form to collect fiscal year spending information from the designated organization.

Contribution Information							
Amount	State Agency Providing the Contribution	Earmark name					
\$300,000,00	P280 - Department of Parks, Recreation, and Tourism	Stump Removal Lake Marion					

Accounting of how the funds have been spent:

Budget

\$150,000.00

\$150,000,00

Fiscal Year 2024

\$0.00

\$0.00

Organization Information					
Entity Name	South Carolina Public Service Authority (Santee Cooper)				
Address	PO Box 2946101				
City/State/Zip	Moncks Corner, SC 29461				
Entity Type	Other				

Description

Channel Bathymetric & Stump Surveying

Initial Construction

	Organization Contact Information					
Contact Name	Michael Melchers					
Position/Title	FERC Administrator					
Telephone	(843) 761-8000 ext. 5379					

Expenditures

Fiscal Year 2025 Fiscal Year 2026

Total

\$0.00

\$0.00

\$0.00

\$0.00

Balance

\$150,000.00

\$150,000,00

\$0.00 \$0.00

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						\$0.00	\$0.00
						\$0.00	\$0.00
						\$0.00	\$0.00
	Grand Total	\$300,000.00	\$0.00	\$0.00	\$0.00	\$0.00	\$300,000.00
X_ Project is underway Project yet to be started	Project is complete, funds are exi			Project completion	n date		
Floject yet to be started	Estillated start date			Estimated Complet	tion date		
	spending summary, goals that were a	expla	nation.			.,	
		Organizatio	n Certifications				
	rtifies that the funds have been expended in	n accordance with	the plan provided t	to the agency provic	ding the distribution a	and for a public purpo	ose.
J. Michael Mcker		FERC Administrat	or	_			
Organization Signature		Title		-			
Michael Melchers		6/10/2024					
Printed Name		Date					