

Printed Name

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							
- Day well on	P280 - Department of Parks, Recreation, and Tourism		Π						

Accounting of how the funds have been spent:

Budget

\$2,500,000.00

	Organization Information
Entity Name	Towb of Cowpens
Address	PO Box 1399
City/State/Zip	Cowpens, SC 29330
Entity Type	Municipality

Description

	Organization Contact Information					
Contact Name	Steve Bolin					
Position/Title	Town Administrator					
Telephone	864-463-3201					

Expenditures

\$0.00

\$0.00

\$0.00

\$0.00

\$0.00

\$2,500,000.00

\$0.00

\$0.00

\$0.00 \$0.00

Fiscal Year 2025 | Fiscal Year 2026 | Fiscal Year 2027

		1				90.00	70.0
						\$0.00	\$0.0
		1				\$0.00	\$0.0
		- 1		—		\$0.00	\$0.0
				—		\$0.00	\$0.0
							
						\$0.00	\$0.0
						\$0.00	\$0.0
						\$0.00	\$0.0
						\$0.00	\$0.0
						\$0.00	\$0.0
						\$0.00	\$0.0
	Grand Total	\$2,500,000.00	\$0.00	\$0.00	\$0.00	\$0.00	\$2,500,000.0
_ Project is underway K Project yet to be started	Project is complete, funds are ex			Project completion de			
Please provide a detailed	I spending summary, goals that were a		d how the expen nation.	ises benefit the publ	lic. If project is yet	to be started, p	rovide an
	The entire \$2,500,000.00 was tran	nsferred to Sparta	nburg County Marc	ch 18, 2025. No funds v	were spent.		
The Organization cert	ifies that the funds have been expended in		Certifications	- 11 00 12	the distribution and	- IV -	
				o the agency providing	, the apribation and	for a public purpo	ose.
ranization signature		Town Administrat Title 6/4/2025		o the agency providing	, and additional of	or a public purpo	ose.

Date