



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 2025-24. 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, 2026.

Contribution Information

Amount	State Agency Providing the Contribution	Purpose
	P280 - Department of Parks, Recreation, and Tourism	Arts Council of York County's 21st Annual Blues & Jazz Festival

Organization Information

Entity Name	Arts Council of York County
Address	121 E. Main St.
City/State/Zip	Rock Hill, SC 29730
Website	https://www.yorkcountyarts.org
Tax ID#	57-0667359
Entity Type	Nonprofit Organization

Organization Contact Information

Name	Melanie Cooper
Position/Title	Executive Director
Telephone	803-323-1966
Email	mcooper@yorkcountyarts.org

Reporting Period

Reporting Period	Quarter 1: July 1, 2025 - September 30, 2025
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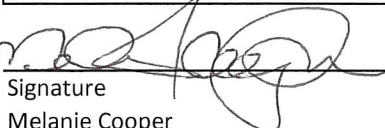
Accounting of how the funds have been spent:

Description <i>(Attach additional detail for subgrantees and affiliated nonprofits)</i>	Budget	Expenditures				Total	Balance
		Quarter 1	Quarter 2	Quarter 3	Quarter 4		
Entertainment	\$25,000.00	\$1,300.00				\$1,300.00	\$23,700.00
Administrative & Fees	\$3,000.00	\$298.00				\$298.00	\$2,702.00
T-Shirts	\$1,500.00	\$0.00				\$0.00	\$1,500.00
Rentals	\$500.00	\$237.80				\$237.80	\$262.20
Insurance	\$1,600.00	\$0.00				\$0.00	\$1,600.00
Off-Duty Police Officers	\$3,000.00	\$0.00				\$0.00	\$3,000.00
Marketing	\$14,600.00	\$4,042.78				\$4,042.78	\$10,557.22
Supplies	\$500.00	\$217.96				\$217.96	\$282.04
						\$0.00	\$0.00
Grand Total	\$49,700.00	\$6,096.54	\$0.00	\$0.00	\$0.00	\$6,096.54	\$43,603.46

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
 Melanie Cooper
 Printed Name

Executive Director
 Title
 10/10/2025
 Date