



## 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 of 2022 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, 2023.

### Contribution Information

Amount	State Agency Providing the Contribution	Purpose
	P280 - Department of Parks, Recreation, and Tourism	Advertising, Marketing, and Promotion of travel and tourism in the Upcountry region.

### Organization Information

Entity Name	Discover Upcountry Carolina Association
Address	500 E North Street, Suite C
City/State/Zip	Greenville, SC 29601
Website	UpcountrySC.com
Tax ID#	57-0695981
Entity Type	Nonprofit Organization

### Organization Contact Information

Name	Tim Todd
Position/Title	Executive Director
Telephone	864-233-2690
Email	tim@upcountrysc.com

### Reporting Period

Reporting Period	Quarter 2: October 1, 2022 - December 30, 2022
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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	
Media Placement - Google Search, FaceBook, and Print Media	\$52,275.00		\$52,275.00			\$52,275.00	\$0.00
Contract Services - Design services, photography, content creation	\$12,750.00		\$12,750.00			\$12,750.00	\$0.00
Operating Expenses - Utilities, Rent, Postage & Shipping, etc.	\$23,162.50		\$23,162.50			\$23,162.50	\$0.00
Salaries & Wages	\$18,062.50		\$18,062.50			\$18,062.50	\$0.00
						\$0.00	\$0.00
						\$0.00	\$0.00
						\$0.00	\$0.00
						\$0.00	\$0.00
						\$0.00	\$0.00
<b>Grand Total</b>	<b>\$106,250.00</b>	<b>\$0.00</b>	<b>\$106,250.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$106,250.00</b>	<b>\$0.00</b>

### Explanation of any unspent funds (to be provided only if unspent funds remain at the end of the fiscal year) :

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### 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  
Tim Todd  
\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Executive Director  
\_\_\_\_\_  
Title  
1/31/2023  
\_\_\_\_\_  
Date