



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 |
|--------------|--|------------------------------------|
| \$100,000.00 | J020 - Department of Health and Human Services | Repair and Replace roofs and HVACs |

Organization Information

| | |
|----------------|--|
| Entity Name | Marion County Long Term Recovery Group |
| Address | 2523 E. Hwy. 76 |
| City/State/Zip | Marion, South Carolina 29571 |
| Website | marioncountylongtermrecovery.wordpress.com |
| Tax ID# | 61-1940802 |
| Entity Type | Nonprofit Organization |

Organization Contact Information

| | |
|----------------|---|
| Name | Linda Phillips |
| Position/Title | Executive Director |
| Telephone | 843-260-6340 (mobile) 843-275-6080 (office) |
| Email | phillipslinda573@gmail.com |

Reporting Period

| | |
|------------------|---|
| Reporting Period | Quarter 3: January 1, 2023 - March 31, 2023 |
|------------------|---|

Accounting of how the funds have been spent:

| Description | Budget | Expenditures | | | | | Balance |
|---------------------------------------|---------------------|---------------|---------------|---------------------|---------------|---------------------|---------------|
| | | Quarter 1 | Quarter 2 | Quarter 3 | Quarter 4 | Total | |
| Replaced damaged roofs on seven homes | \$74,160.00 | \$0.00 | \$0.00 | \$74,825.74 | | \$74,825.74 | -\$665.74 |
| Replaced damaged HVACs in three homes | \$25,840.00 | \$0.00 | \$0.00 | \$25,174.26 | | \$25,174.26 | \$665.74 |
| | | | | | | \$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 | \$100,000.00 | \$0.00 | \$0.00 | \$100,000.00 | \$0.00 | \$100,000.00 | \$0.00 |

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.

Linda W. Phillips
Signature
Linda W. Phillips
Printed Name

Executive Director
Title
4/6/2023
Date