



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
\$1,000,000.00	J020 - Department of Health and Human Services	Building of medical facility at Wise Road

Organization Information

Entity Name	Horry County Commission on Alcohol and Drug Abuse
Address	2404 Wise Road
City/State/Zip	Conway/SC/29526
Website	www.shorelinebhs.org
Tax ID#	57-0741188
Entity Type	Nonprofit Organization

Organization Contact Information

Name	Megan Colegrove
Position/Title	Director of Finance
Telephone	843-365-8884 ext. 214
Email	megan@shorelinebhs.org

Reporting Period

Reporting Period	Quarter 1: July 1, 2022 - September 30, 2022
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Accounting of how the funds have been spent:

Description	Budget	Expenditures				Total	Balance
		Quarter 1	Quarter 2	Quarter 3	Quarter 4		
Building of medical facility	\$1,000,000.00	\$0.00				\$0.00	\$1,000,000.00
						\$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	\$0.00
						\$0.00	\$0.00
Grand Total	\$1,000,000.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$1,000,000.00

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.

Megan Colegrove
 Signature
 Megan Colegrove
 Printed Name

Director Of Finance
 Title
 5/25/2023
 Date



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Organization Contact Information

Name	Megan Colegrove
Position/Title	Director of Finance
Telephone	843-365-8884 ext. 214
Email	megan@shorelinebhs.org

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					Total	Balance
		Quarter 1	Quarter 2	Quarter 3	Quarter 4			
Building of medical facility	\$1,000,000.00	\$0.00	\$0.00			\$0.00	\$1,000,000.00	
						\$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	\$0.00	
						\$0.00	\$0.00	
Grand Total	\$1,000,000.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$1,000,000.00	

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.

Megan Colegrove

Signature

Megan Colegrove

Printed Name

Director Of Finance

Title

5/25/2023

Date



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Address	2404 Wise Road
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Website	www.shorelinebhs.org
Tax ID#	57-0741188
Entity Type	Nonprofit Organization

Organization Contact Information

Name	Megan Colegrove
Position/Title	Director of Finance
Telephone	843-365-8884 ext. 214
Email	megan@shorelinebhs.org

Reporting Period

Reporting Period	Quarter 3: January 1, 2023 - March 31, 2023
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Accounting of how the funds have been spent:

Description	Budget	Expenditures					Total	Balance
		Quarter 1	Quarter 2	Quarter 3	Quarter 4			
Building of medical facility	\$1,000,000.00	\$0.00	\$0.00	\$0.00		\$0.00	\$1,000,000.00	
						\$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	\$0.00	
						\$0.00	\$0.00	
Grand Total	\$1,000,000.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$1,000,000.00	

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.

Megan Colegrove
 Signature
 Megan Colegrove
 Printed Name

Director Of Finance
 Title
5/25/2023
 Date