

## 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 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, 2024.

|   |   | Contribution Information           |  |
|---|---|------------------------------------|--|
| Amount  | State Agency Providing the Contribution | Purpose                            |  |
| \$300,000.00 J020 - Department of Health and Human Services |   | Workforce Development and Training |  |

| Organization Information |                             |  |  |  |
|--------------------------|-----------------------------|--|--|--|
| Entity Name              | Pee Dee Healthy Start, Inc. |  |  |  |
| Address                  | 314 W. Pine Street          |  |  |  |
| City/State/Zip           | Florence, SC 29501          |  |  |  |
| Website                  | www.pdhs.org                |  |  |  |
| Tax ID#                  | 58-2282396                  |  |  |  |
| Entity Type              | Nonprofit Organization      |  |  |  |

| Organization Contact Information |                    |  |  |  |
|----------------------------------|--------------------|--|--|--|
| Name                             | Madie A. Robinson  |  |  |  |
| Position/Title                   | Executive Director |  |  |  |
| Telephone                        | 843-662-1482       |  |  |  |
| Email                            | madie@pdhs.org     |  |  |  |

| Reporting Period |  |  |  |  |  |  |  |
|------------------|--|--|--|--|--|--|--|
| Reporting Period | Quarter 2: October 1, 2023 - December 30, 2023 |  |  |  |  |  |  |

| Accounti   | ng of how the f | unds have bee | n spent:    |           |           | 7777         |              |
|--|-----------------|---------------|-------------|-----------|-----------|--------------|--------------|
| Description  | Budget          | Expenditures  |             |           |           |              |              |
| (Attach additional detail for subgrantees and affiliated nonprofits) |                 | Quarter 1     | Quarter 2   | Quarter 3 | Quarter 4 | Total        | Balance      |
| Workforce Development and Training                                   | \$300,000.00    | \$48,785.24   | \$64,504.38 |           |           | \$113,289.62 | \$186,710.38 |
|  |                 |               |             |           |           | \$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  | \$300,000.00    | \$48,785.24   | \$64,504.38 | \$0.00    | \$0.00    | \$113,289.62 | \$186,710.38 |

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.

Madie A. Robinson