

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
	1020 - Department of Health and Human Services	

Organization Information						
Entity Name	Bridge Over Foundation - Project Bridge					
Address	212 Saskatoon Drive					
City/State/Zip	Hopkins South Carolina 29061					
Website						
Tax ID#						
Entity Type						

Organization Contact Information					
Name	Bridge Over Foundation				
Position/Title					
Telephone	803-846-3175				
Email	hamiltonjacobs@yahoo.com				

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

Accounting of how the funds have been spent:								
Description				Expenditures				
(Attach additional detail for subgrantees and affiliated nonprofits)	Budget	Quarter 1	Quarter 2	Quarter 3	Quarter 4	Total	Balance	
	\$25,000.00	\$0.00				\$0.00	\$25,000.00	
T-shirt order placed for Project Bridge mentorship program and upcoming Peac			\$5,000.00			\$5,000.00	-\$5,000.00	
						\$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	
Grand Total	\$25,000.00	\$0.00	\$5,000.00	\$0.00	\$0.00	\$5,000.00	\$20,000.00	

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

Funds not received as of 12/07/23

Expenditure Certification

Ш	he C	Organization	n certifies	that t	he funds	s have bee	n expende	d in accord	ance with t	ne Plar	n provided	to the	Agency	Providin	g the	Distribut	ion and	tor a	public	purpose

Signature	Title
Printed Name	Date