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
	J020 - Department of Health and Human Services	

Organization Information	
Entity Name	Smith Medical Clinic, Inc
Address	99 Baskervill Drive
City/State/Zip	Pawleys Island, SC 29585
Website	www.smithfreeclinic.org
Tax ID#	57-0786699
Entity Type	Nonprofit Organization

Organization Contact Information	
Name	Gretchen Smith
Position/Title	Executive Director
Telephone	864-616-2833 (cell)
Email	gsmith@smithfreeclinic.org

Reporting Period	
Reporting Period	Quarter 1: July 1, 2023 - September 30, 2023

Accounting of how the funds have been spent:

Description (Attach additional detail for subgrantees and affiliated nonprofits)	Budget	Expenditures					Balance
		Quarter 1	Quarter 2	Quarter 3	Quarter 4	Total	
Smith Medical Clinic has not received funding as of 12/07/2023	$250,000.00	$0.00				$0.00	$250,000.00
						$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	**$250,000.00**	**$0.00**	**$0.00**	**$0.00**	**$0.00**	**$0.00**	**$250,000.00**

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.

Gretchen D Smith
Signature

GRETCHEN SMITH
Printed Name

Ex. Director
Title

12/7/23
Date