



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.

Amount	State Agency Providing the Contribution	Purpose
\$150,000.00		Increase/maximize local fresh food to vulnerable communities

Organization Information	
Entity Name	Dianne's Call
Address	1634 Fairhaven Drive
City/State/Zip	Columbia, SC 29210
Website	www.diannescall.org
Tax ID#	45-0556099
Entity Type	Nonprofit Organization

Organization Contact Information	
Name	Bonita D. Clemons
Position/Title	Executive Director
Telephone	803-479-2231
Email	bonitaclemons@gmail.com

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

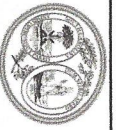
Description	Budget	Expenditures				Total	Balance
		Quarter 1	Quarter 2	Quarter 3	Quarter 4		
New mobile unit to transport and distribute fresh food	\$50,000.00			\$50,000.00		\$50,000.00	\$0.00
Personnel	\$65,000.00			\$25,000.00		\$25,000.00	\$40,000.00
Marketing/website	\$10,000.00			\$10,000.00		\$10,000.00	\$0.00
Supplies and equipment	\$8,000.00			\$5,000.00		\$5,000.00	\$3,000.00
Fuel/travel	\$5,000.00			\$3,985.00		\$3,985.00	\$1,015.00
Fresh local foods and veggies	\$5,000.00			\$2,988.00		\$2,988.00	\$2,012.00
Evaluation	\$5,000.00			\$5,000.00		\$5,000.00	\$0.00
Insurance	\$2,000.00			\$2,000.00		\$2,000.00	\$0.00
Grand Total	\$150,000.00	\$0.00	\$0.00	\$103,973.00	\$0.00	\$103,973.00	\$46,027.00

Accounting of how the funds have been spent:
 Explanation of any unspent funds (to be provided only if unspent funds remain at the end of the fiscal year):
 Funds received in 3rd quarter

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.

Signature Bonita D. Clemons
 Bonita D Clemons
 Printed Name

Executive Director
 Title
 5/24/2023
 Date



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Contribution Information

Amount	\$150,000.00
State Agency Providing the Contribution	

Purpose: Increase/maximize local fresh food to vulnerable communities

Organization Information

Entity Name	Diannes Call
Address	1634 Fairhaven Drive
City/State/Zip	Columbia, SC 29210
Website	www.diannescall.org
Tax ID#	45-0556099
Entity Type	Nonprofit Organization

Organization Contact Information

Name	Bonita D. Clemons
Position/Title	Executive Director
Telephone	803-479-2231
Email	bonitaclemons@gmail.com

Reporting Period

Reporting Period	Quarter 4: April 1, 2023 - June 30, 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		
New mobile unit to transport and distribute fresh food	\$50,000.00			\$50,000.00		\$50,000.00	\$0.00
Personnel	\$65,000.00			\$25,000.00	\$40,000.00	\$65,000.00	\$0.00
Marketing/website	\$10,000.00			\$10,000.00		\$10,000.00	\$0.00
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Insurance	\$2,000.00			\$2,000.00		\$2,000.00	\$0.00
Grand Total	\$150,000.00	\$0.00	\$0.00	\$103,973.00	\$46,027.00	\$150,000.00	\$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.

Bonita D. Clemons
Signature

Bonita D Clemons

Printed Name

Executive Director

Title

6/30/2023

Date