



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	Sight Savers America, Inc.
Address	337 Business Circle
City/State/Zip	Pelham, AL 35124
Website	www.sightsaversamerica.org
Tax ID#	30-0188234
Entity Type	Nonprofit Organization

Organization Contact Information

Name	Dawn DeCarlo, OD, PhD
Position/Title	Chief Executive Officer
Telephone	205-942-2627, ext. 201
Email	ddecarlo@sightsaversamerica.org

Reporting Period

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

Accounting of how the funds have been spent:

Description <i>(Attach additional detail for subgrantees and affiliated nonprofits)</i>	Budget	Expenditures					Total	Balance
		Quarter 1	Quarter 2	Quarter 3	Quarter 4			
School year screening & follow-up planning	\$12,000.00	\$4,800.00	\$2,400.00			\$7,200.00	\$4,800.00	
Expansion & maintenance of eye care partner network	\$5,000.00	\$1,250.00	\$1,250.00			\$2,500.00	\$2,500.00	
Partnership building/scheduling with Head Starts, preschools & daycares	\$26,000.00	\$6,500.00	\$11,501.00			\$18,001.00	\$7,999.00	
Vision screening equipment/supplies, technology/database for screening & follow-up	\$9,000.00	\$1,458.00	\$1,952.00			\$3,410.00	\$5,590.00	
Salaries for vision screeners	\$70,000.00	\$24,742.00	\$14,042.00			\$38,784.00	\$31,216.00	
Travel for vision screeners	\$15,000.00	\$2,333.00	\$1,090.00			\$3,423.00	\$11,577.00	
Screening & follow-up data analysis, importation of referrals & reporting	\$10,000.00	\$192.00	\$4,600.00			\$4,792.00	\$5,208.00	
Comprehensive one-on-one case management	\$90,000.00	\$1,725.00	\$41,175.00			\$42,900.00	\$47,100.00	
Eye care treatments & high-tech vision aids (not covered by insurance or in-kind)	\$13,000.00	\$0.00	\$4,625.00			\$4,625.00	\$8,375.00	
Grand Total	\$250,000.00	\$43,000.00	\$82,635.00	\$0.00	\$0.00	\$125,635.00	\$124,365.00	

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.

Signature
Gwen C. Hughes

Printed Name

Chief Financial Officer

Title

02/10/24

Date