

State of South Carolina Contribution Expenditure Report

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. 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

	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	Position/Title Executive Director
Telephone	864-616-2833 (cell)
Email	gsmith@smithfreeclinic.org

	2022	Oliarter 2: October 1 2023 - December 20 2023	October 1	Ouarter 2:	Reporting Period
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		Expenditures			
Budget Quarter 1	Quarter 2	Quarter 3	Quarter 4	Total	Balance
\$250,000.00 \$0.00				\$0.00	\$250,000.00
	\$65,650.78			\$65,650.78	-\$65,650.78
	\$3,479,24			\$3 479 24	-\$3 479 24
	\$0.000.07			20000	10,000
	17:000/04			12.000,00	-55,500.27
				\$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	\$78,430.29	\$0.00	\$0.00	\$78,430.29 \$171,569.7:	\$171,569.71
	Quarter 1 \$0.00 \$0.00	Quarter 1 \$0.00	Expend Counter 1 Quarter 2 Quarter 3,479.24 \$9,300.27 \$9,300.27 \$9,300.27 \$9,300.27	Expenditures Expenditures Quarter 1 Quarter 2 Quarter 3 Quarter 3	Expenditures Quarter 1 Quarter 2 Quarter 3 Quarter 4 \$0.00 \$65,650.78 \$3,479.24 \$9,300.27 \$9,300.27 \$50.00 \$78,430.29 \$0.00 \$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.

SIGNATUREN SMITTLE Printed Name