State of South Carolina Request for Contribution Distribution

This form is designed to collect the information 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 for the designated organization. The state agency providing the contribution should use this form to collect information from the designated organization. The information must be collected from the designated organization before the funds can be disbursed.

Contribution Information		
Amount	State Agency Providing the Contribution	Purpose
$50,000	SCDHHS	Below

Organization Information	
Entity Name	Wiley Kennedy Foundation
Address	1029 Eastman Street
City/State/Zip	Columbia, SC, 29303
Website	www.wileykennedy-foundation.org
Tax ID#	31-1653892
Entity Type	Nonprofit Organization

Organization Contact Information	
Contact Name	Gwendolyn Singletary
Position/Title	Executive Director
Telephone	803 704 4149
Email	gsingletary@wileykennedy-foundation.org

Plan/Accounting of how these funds will be spent:

Description	Budget	Explanation
Managing Director	$31,500.00	Overseeeing the operation and execution of program
Community Outreach Coordinator	$13,500.00	Community engagement, coordinationw/ keep stakholders and community
Administrative/Overhead	$5,000.00	Grant reporting, Fiscal coordination
Grand Total	**$50,000.00**	

Please explain how these funds will be used to provide a public benefit:

This is a Community Health Diabetes Management program to promote the healthy lifestyles of residents in the zip code 29203, through the reduction in risks associated with diabetes. According to the Healthy People 2022, the maintenance of healthy lifestyle is associated with individual awareness & thus behaviors to control life-threatening conditions including diabetes. In this regard, the key underlying health issue is the prevalence of diabetes and its complications in the referenced zip code 29203 community. We will engage key stakeholders for collaboration: residents, diabetic patients (including injured and pregnant patients), healthcare providers (physicians, nurses, pharmacists) community organizations (hospitals, churches, universities), etc. The program's Key Components are assessment and diagnosis of diabetes in the population, implementation of personalized care plans, patient education on self-management, regular evaluation, and monitoring, etc. Our Expected Outcomes:1. Reduced incidence of new diabetes cases in the community 2. Improved glycemic control among diabetic patients (lower A1C levels) 3. Decreased rate of diabetes-related complications4. Reduced hospital admissions for diabetes-related issues 5. Improved quality of life for diabetic patients 6. Increased patient knowledge and self-management skills 7. Cost savings in long-term diabetes care 8. Reduced disparities in diabetes outcomes among different demographic groups.

Organization Certifications

1) Organization hereby gives assurance that no person shall, upon the grounds of race, creed, color, or national origin, be excluded from participation in, be denied the benefit of, or be otherwise subjected to discrimination under any program or activity for which this organization is responsible.
2) Organization certifies that it will provide quarterly spending reports to the Agency Providing Contribution listed above.
3) Organization certifies that it will provide an accounting at the end of the fiscal year to the Agency Providing Contribution listed above.
4) Organization certifies that it will allow the State Auditor to audit or cause to be audited the contributed funds.

Organization Signature

Executive Director
Title

Gwendolyn Singleton
Printed Name

Aug 5, 2024
Date

Certifications of State Agency Providing Contribution

1) State Agency certifies that the planned expenditure aligns with the Agency's mission and/or the purpose specified in the appropriations act.
2) State Agency certifies that the Organization has set forth a public purpose to be served through receipt of the expenditure.
3) State Agency certifies that it will make distributions directly to the organization.
4) State Agency certifies that it will provide the quarterly spending reports and accounting received from the organization to the Senate Finance Committee, House Ways and Means Committee, and the Executive Budget Office by June 30, 2025.
5) State Agency certifies that it will publish on their website any and all reports, accountings, forms, updates, communications, or other materials required by Proviso 117.21 of the appropriations act.
6) State Agency will certify to the Office of the Governor that it has complied with the requirements of Executive Order 2022-19 by June 30, 2025.

Agency Head Signature

8/6/2024
Date

Jenny Stirling for Dir. Kerr
Printed Name