



### 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 each quarter.

**Quarterly reports are due as follows: Q1, October 31, 2024; Q2, January 31, 2025; Q3, April 30, 2025; Q4, July 31, 2025. Please submit completed reports to Roxanne**

**Ancheta, AnchetaRM@scdot.org**

#### Contribution Information

Amount	State Agency Providing the Contribution	Purpose
\$367,715.00	U120 - Department of Transportation	Soccee Bridge and Approaches

#### Organization Information

Entity Name	Williamsburg County Government
Address	201 W Main St
City/State/Zip	Kingstree, SC 29556
Website	www.williamsburgcounty.sc.gov
Tax ID#	57-6000412
Entity Type	County

#### Organization Contact Information

Name	Kristen Miller
Position/Title	Assistant Grants Administrator
Telephone	(843)355-9321 x5202
Email	kristen.miller@wc.sc.gov

#### Reporting Period

Reporting Period	
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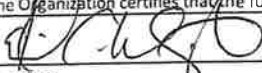
#### Accounting of how the funds have been spent:

Description (Attach additional detail for subgrantees and affiliated nonprofits)	Budget	Expenditures				Total	Balance
		Quarter 1	Quarter 2	Quarter 3	Quarter 4		
No funds have been spent during this quarter.	\$367,715.00					\$0.00	\$367,715.00
						\$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
<b>Grand Total</b>	<b>\$367,715.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$367,715.00</b>

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 

County Supervisor \_\_\_\_\_  
Title

Kelvin C. Washington  
Printed Name

9/9/2024  
Date