



**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
\$2,200,000.00	U120 - Department of Transportation	Pedestrian Connector through Bacons Bridge Road between Ashley River Park and Library

**Organization Information**

Entity Name	Dorchester County Government
Address	201 Johnston Street
City/State/Zip	St. George, SC 29477
Website	www.dorchestercountysc.gov
Tax ID#	57-6000344
Entity Type	County

**Organization Contact Information**

Name	Jordyn M. Baker, CGFO
Position/Title	Capital Project Manager
Telephone	843-810-1732
Email	jbaker2@dorchestercountysc.gov

**Reporting Period**

Reporting Period	Quarter 3: January 1, 2024 - March 31, 2024
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**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			
Planning/Design	\$400,000.00	\$0.00	\$0.00	\$0.00		\$0.00	\$400,000.00	
Construction	\$1,800,000.00	\$0.00	\$0.00	\$0.00		\$0.00	\$1,800,000.00	
						\$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>\$2,200,000.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$2,200,000.00</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  
Jordyn M. Baker  
\_\_\_\_\_  
Printed Name

Capital Project Manager  
\_\_\_\_\_  
Title  
5/20/2024  
\_\_\_\_\_  
Date