

## 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			
\$2,000,000.00	L060 - Department of Aging	Construction of North Charleston Area Senior Center			

Organization Information				
Entity Name	Dorchester County Government			
Address	201 Johnston Street			
City/State/Zip	Saint George, SC 29477			
Website	https://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) 832-0172			
Email	jbaker2@dorchestercountysc.gov			

Reporting Period					
Reporting Period	Quarter 3: January 1, 2024 - March 31, 2024				

Accounting of how the funds have been spent:							
Description		Expenditures					
(Attach additional detail for subgrantees and affiliated nonprofits)	Budget	Quarter 1	Quarter 2	Quarter 3	Quarter 4	Total	Balance
Construction of Facility	\$1,648,797.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$1,648,797.00
Design Fee for A/E (Glick/Boehm)	\$351,203.00	\$0.00	\$0.00	\$351,203.00	\$0.00	\$351,203.00	\$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
Grand Total	\$2,000,000.00	\$0.00	\$0.00	\$351,203.00	\$0.00	\$351,203.00	\$1,648,797.00

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

Jordyn M. Baker

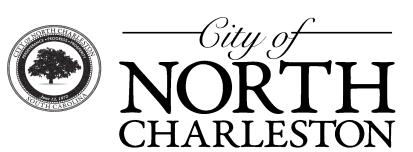
Printed Name

Capital Project Manager
Title
5/20/2024

Date

## PURCHASE ORDER

PAGE NO. 1 OF 1



P.O. NUMBER	DATE		
24-003409	12/15/2023		

THIS NUMBER MUST APPEAR ON ALL INVOICES, PACKING LISTS, LABELS, BILLS OF LADING AND CORRESPONDENCE.

**VENDOR: GLICK/BOEHM & ASSOCIATES** 

493 KING STREET, SUITE 100 CHARLESTON, SC 29403

843-577-6377

SHIP TO: Executive Department 2500 City Hall Lane

North Charleston, SC 29406

	040-011-0011							
	VENDOR #	ŧ		DELIVERY DATE	F.O.B.			
	00938				SHIPPING			
	REQ. NO.		REQ. DATE.	REQUISITIONED BY:				
	R24-003499			12/14/2023		Denise Badillo		
	VENDOR FA	X #			VENDOR EMAIL			
	843-722-1	768	_			_		
LINE NO.	QUANTITY	UOM		ITEM NO. AND DESCRIF	TION	UNIT COST	EXTENDED COST	
1	351,203.00	JOB	SEF DOI PRO ARO WE' FEE	OVIDE ARCHITECTURAL AND ENG RVICES FOR THE CONSTRUCTION RCHESTER COUNTY SENIOR CEN DPOSAL DATED 11/13/23 TO INCLI CHITECTURE, CIVIL ENGINEERING TLANDS SERVICES. PERMIT FEE, ES -860-590760-51325-000   NaN	NOF THE ITER PER YOUR JDE LANDSCAPE G, SITE SURVEY,	\$1.00	\$351,203.00	
						TOTAL	\$ 351,203.00	

IMPORTANT - TO RECEIVE PAYMENT ALL INVOICES AND SHIPPING LABELS MUST SHOW PURCHASE ORDER NUMBER.

PLEASE SEND INVOICE TO:

CITY OF NORTH CHARLESTON ACCOUNTS PAYABLE P.O. Box 190016 NORTH CHARLESTON, SC 29419 THIS ORDER BECOMES A BINDING CONTRACT UPON THE TERMS AND CONDITIONS SET FORTH BY THE CITY OF NORTH CHARLESTON WHEN ACCEPTED BY ACKNOWLEDGMENT OR ANY PERFORMANCE.

**AUTHORIZED BY:** 

Wille Attenza