



# 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, 2025.

Contribution Information		
Amount	State Agency Providing the Contribution	Purpose
\$400,000.00	L060 - Department of Aging	Housing Repairs

Organization Information	
Entity Name	TRI-CITY VISIONARIES INC
Address	8801 BLUFF ROAD
City/State/Zip	EASTOVER, SC 29044
Website	HTTPS://TRICITYVISIONARIES.COM
Tax ID#	20-2965900
Entity Type	Nonprofit Organization

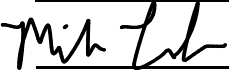
Organization Contact Information	
Name	Monika Lamb
Position/Title	Program Director
Telephone	(803) 814-5490
Email	<a href="mailto:tcv29209@gmail.com">tcv29209@gmail.com</a>

Reporting Period	
Reporting Period	Quarter 3: January 1, 2025 - March 31, 2025

Accounting of how the funds have been spent:							
Description (Attach additional detail for subgrantees and affiliated nonprofits)	Budget	Expenditures					Balance
		Quarter 1	Quarter 2	Quarter 3	Quarter 4	Total	
Program Expenses	\$ 357,000.00	\$0.00	\$276,962.07	\$ -	\$ -	\$ 276,962.07	\$ 80,037.93
Adminstrative Expense	\$ 27,000.00	\$0.00	\$20,000.00	\$ -	\$ -	\$ 20,000.00	\$ 7,000.00
Marketing Expense	\$ 1,000.00	\$0.00	\$0.00	\$ -	\$ -	\$ -	\$ 1,000.00
Indirect Cost	\$ 15,000.00	\$0.00	\$10,300.00	\$ -	\$ -	\$ 10,300.00	\$ 4,700.00
		\$0.00	\$0.00	\$ -	\$ -	\$ -	\$ -
		\$0.00	\$0.00	\$ -	\$ -	\$ -	\$ -
		\$0.00	\$0.00	\$ -	\$ -	\$ -	\$ -
	\$ -	\$0.00	\$0.00	\$ -	\$ -	\$ -	\$ -
	\$ -	\$0.00	\$0.00	\$ -	\$ -	\$ -	\$ -
Grand Total	\$ 400,000.00	\$0.00	\$ 307,262.07	\$ -	\$ -	\$ 307,262.07	\$ 92,737.93

Explanation of any unspent funds (to be provided only if unspent funds remain at the end of the fiscal year) :
Tri-City Visionaries repairshomes that are unsafely exposed to inectious disease that saffer from weatherization concerns.

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  
Monika Lamb  
\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
President  
\_\_\_\_\_  
Title  
12/29/2024  
\_\_\_\_\_  
Date