

## 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 |  |  |  |  |  |
|                          |   |         |  |  |  |  |  |

| Organization Information |                          |  |  |  |  |
|--------------------------|--------------------------|--|--|--|--|
| Entity Name              | Rural Life Resources CDC |  |  |  |  |
| Address                  | 3725 Magnolia Street     |  |  |  |  |
| City/State/Zip           | Orangeburg, SC 29118     |  |  |  |  |
| Website                  | rurallifesources.com     |  |  |  |  |
| Tax ID#                  | 83-4244548               |  |  |  |  |
| Entity Type              |                          |  |  |  |  |

| Organization Contact Information |                        |  |  |  |  |
|----------------------------------|------------------------|--|--|--|--|
| Name                             | LaShun D Hickman       |  |  |  |  |
| Position/Title                   | Finance Manager        |  |  |  |  |
| Telephone                        | 803.534.1980           |  |  |  |  |
| Email                            | Ihickman@klmantion.org |  |  |  |  |

|                  | Reporting Period |  |
|------------------|------------------|--|
| Reporting Period |                  |  |

| Accounting of how the funds have been spent:                         |              |              |             |           |           |             |              |  |  |
|--|--------------|--------------|-------------|-----------|-----------|-------------|--------------|--|--|
| Description  | 1071         | Expenditures |             |           |           |             |              |  |  |
| (Attach additional detail for subgrantees and affiliated nonprofits) | Budget       | Quarter 1    | Quarter 2   | Quarter 3 | Quarter 4 | Total       | Balance      |  |  |
| Rent   | \$57,600.00  | \$4,800.00   | \$14,400.00 |           |           | \$19,200.00 | \$38,400.00  |  |  |
| Facility Upgrades-deposit  | \$48,780.00  | \$6,675.30   | \$21,293.00 |           |           | \$27,968.30 | \$20,811.70  |  |  |
| Promotional Materials/Supplies                                       | \$15,000.00  |              | \$5,153.00  |           |           | \$5,153.00  | \$9,847.00   |  |  |
| Salaries   | \$69,120.00  |              | \$5,760.00  |           |           | \$5,760.00  | \$63,360.00  |  |  |
|  |              |              |             |           |           | \$0.00      | \$0.00       |  |  |
|  |              |              |             |           |           | \$0.00      | \$0.00       |  |  |
|  |              |              |             |           |           | \$0.00      | \$0.00       |  |  |
|  |              |              |             |           |           | \$0.00      | \$0.00       |  |  |
|  |              |              |             |           |           | \$0.00      | \$0.00       |  |  |
| Grand Total  | \$190,500.00 | \$11,475.30  | \$46,606.00 | \$0.00    | \$0.00    | \$58,081.30 | \$132,418.70 |  |  |

Explanation of any unspent funds (to be provided only if unspent funds remain at the end of the fiscal year):

**Expenditure Certification** 

The Qrganization 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

room

Printed Name

Title 12/202

Date