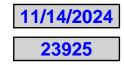
State of South Carolina Contribution Expenditure Report



PIN: **1818423**

Contract and Reporting Period Behavioral Health Services of Pickens Co. **EMK737 Entity Name** Contract Number Quarter 1 **Reporting Period Contribution Information** \$2,000,000.00 SC Department of Public Health New Facility Renovations for BHSFC **Organization Contact Information** Angela Farmer **Executive Director** (864) 898-5800 afarmer@bhspickens.com Contact Name Position/Title Telephone Email Accounting of how the funds have been spent: Description Expenditures \$1,546,664.65 **Renovations** \$1,546,664.65 Grand Total: \$1,546,664.65 \$453,335.35 Quarter 1 Quarter 2 Quarter 3 **Remaining Balance** Quarter 4 Explanation of any unspent funds (to be provided only if unspent funds remain at the end of the fiscal year):

Expenditure Certification

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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.

Reason for Rejection: (Entity will recieve this in email response.)	Angela Farmer 11/14/2024, 11:41:50 AM
	Organization Signature