



# State of South Carolina Contribution Expenditure Report

2/10/2025

24210

PIN: 1809625

## Contract and Reporting Period

Berkeley County

Entity Name

EMK683

Contract Number

Quarter 1

Reporting Period

## Contribution Information

\$270,000.00

SC Department of Public Health

Berkeley County EMS

## Organization Contact Information

Michael Shirey

Contact Name

Chief

Position/Title

(843) 934-1818

Telephone

michael.shirey@berkeleycountysc.gov

Email

## Accounting of how the funds have been spent:

Description

Expenditures

No expenditures in Q1

\$0.00

Grand Total:

\$0.00

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

Program began Feb 3, 2025.

## 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.

Reason for Rejection: (Entity will receive this in email response.)

Michael Shirey

2/10/2025, 7:58:19 AM

Organization Signature