



# State of South Carolina Contribution Expenditure Report

12/2/2024

23942

PIN: 1814761

## Contract and Reporting Period

Clarity, Inc.

Entity Name

EMK699

Contract Number

Quarter 1

Reporting Period

## Contribution Information

\$150,000.00

SC Department of Public Health

Audiology Services

## Organization Contact Information

Barbara Martin

Contact Name

Interim Executive Director

Position/Title

(864) 275-4488

Telephone

bmartin@clarityupstate.org

Email

## Accounting of how the funds have been spent:

Description

Expenditures

Hearing aids purchased from multiple vendors

\$94,342.57

Monthly rent for treatment space at the Center for Developmental Services

\$28,737.02

Patient database

\$5,112.41

Accounting Services

\$21,808.00

\$150,000.00

\$0.00

Grand Total: \$150,000.00

Quarter 1

Quarter 2

Quarter 3

Quarter 4

Remaining Balance

## 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.

Barbara Martin

12/2/2024, 10:28:01 AM

Organization Signature

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