



State of South Carolina Contribution Expenditure Report

3/12/2025

24034

PIN: 1847009

Contract and Reporting Period

Prisma Health - Upstate

EMK823

Entity Name

Contract Number

Quarter 2

Reporting Period

Contribution Information

\$2,000,000.00

SC Department of Public Health

Prisma Health Sickle Cell Initiatives

Organization Contact Information

Polly H. Miller

SVP Finance, Enterprise Contracting

(864) 516-6440

grants@prismahealth.org

Contact Name

Position/Title

Telephone

Email

Accounting of how the funds have been spent:

Description

Expenditures

None.

\$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):

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.)

Rebecca Taylor

3/12/2025, 4:40:02 PM

Organization Signature