



State of South Carolina Contribution Expenditure Report

6/16/2025

24034

PIN: 1847009

Contract and Reporting Period

Prisma Health - Upstate

EMK823

Entity Name

Contract Number

Quarter 3

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

Salary

\$40,601.48

Fringe benefits

\$9,537.30

Grand Total:

\$50,138.78

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

The project is progressing and personnel have been hired.

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.

Polly H. Miller

6/16/2025, 8:29:20 AM

Organization Signature

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