

State of South Carolina Contribution Expenditure Report

2022-19. This form must be submitted to the state agency that is providing the contribution to the designation organization at the end of year quarter and by June 30, 2024. This form is designed to collect the quarterly and annual expenditure reports required by South Carolina in accordance with Proviso 117.21 of the appropriations act and Executive Order

\$500,000.00	Amount		- Column
\$500,000.00 L320 - Housing Finance and Development Authority	State Agency Providing the Contribution		
Affordable Housing	Purpose	Contribution Information	

	Organization Information
Entity Name	Marion-Dillon County Habitat for Humanity
Address	3153 E. Hwy 76
City/State/Zip	Mullins, SC 29574
Website	www.marion-dilloncountyhfh.org
Tax ID#	57-1009097
Entity Type	Nonprofit Organization

Reporting Period | Quarter 3: January 1, 2024 - March 31, 2024

Reporting Period

	Organization Contact Information
Name	Ricky Hardee
Position/Title	Position/Title Executive Director
Telephone	843-464-3747
Email	ricky.hardee@marion-dilloncountyhfh.org

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\$110,000.00	\$0.00		\$0.00	\$0.00	\$0.00	\$110,000.00	New M-DCHFH Home #2
\$110,000.00	\$0.00		\$0.00	\$0.00	\$U.UU	טטיטטיטדר¢	INCW MI DOTT THE THE
	+0.00		\$0.00	÷0.00	\$0.00	¢110 000 00	New M-DCHEH Home #1
\$18,720.00	\$0.00		\$0.00	\$0.00	\$0.00	\$18,720.00	Part-time Store Employee
\$21,840.00	\$0.00		\$0.00	\$0.00	\$0.00	\$21,840.00	Part-time Store Employee
\$189,440.00	\$0.00		\$0.00	\$0.00	\$0.00	\$189,440.00	New Office/Store Location
\$48,269.23	\$1,730.77		\$1,730.77	\$0.00	\$0.00	\$50,000.00	Assitant Director Salary
Balance	Total	Quarter 4	Quarter 3	Quarter 2	Quarter 1	Budget	(Attach additional detail for subgrantees and affiliated nonprofits)
			Expenditures				Description
				n spent:	unds have beel	Accounting of now the funds have been	Account

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.

Signature Ricky Hardee
Printed Name

Executive Director
Title
6/5/2024
Date