



### State of South Carolina Contribution Expenditure Report

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 of 2022 and Executive Order 2022-19. This form must be submitted to the state agency that is providing the contribution to the designated organization at the end of each quarter. SFY 25-26 Quarterly Reports are due as follows: Q1, October 31, 2025; Q2, January 31, 2026; Q3, April 30, 2026; Q4, July 31, 2026. Please submit completed reports to Roxanne Ancheta, AnchetaRM@scdot.org.

#### Contribution Information

Amount	State Agency Providing the Contribution	Purpose
\$5,000,000.00	U120 - Department of Transportation	Provide parking to the five Points Neighborhood to support economic development

#### Organization Information

Entity Name	City of Columbia
Address	1737 Main St
City/State/Zip	Columbia, SC 29201
Website	www.ColumbiaSC.gov
Tax ID#	576000229
Entity Type	Municipality

#### Organization Contact Information

Name	Missy Caughman
Position/Title	Assistant City Manager/SII
Telephone	(803) 545-3201
Email	missy.caughman@columbiasc.gov

#### Organization Contact Information

Name	Jeff Palen
Position/Title	Assistant City Manager/CFO
Telephone	803-545-0211
Email	Jeff.Palen@columbiasc.gov

#### Reporting Period

Reporting Period	Quarter 2: October 1, 2025 - December 30, 2025
------------------	--

#### Accounting of how the funds have been spent:

Description	Budget	Expenditures				Total	Balance
		Quarter 1	Quarter 2	Quarter 3	Quarter 4		
Parking Deck/Garage	\$5,000,000.00	\$0.00	\$0.00			\$0.00	\$5,000,000.00
						\$0.00	\$0.00
						\$0.00	\$0.00
						\$0.00	\$0.00
						\$0.00	\$0.00
						\$0.00	\$0.00
						\$0.00	\$0.00
						\$0.00	\$0.00
						\$0.00	\$0.00
Grand Total	\$5,000,000.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$5,000,000.00

#### 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.

  
 \_\_\_\_\_  
 Signature  
 Teresa Wilson  
 \_\_\_\_\_  
 Printed Name

City Manager  
 \_\_\_\_\_  
 Title  
 2/4/2026  
 \_\_\_\_\_  
 Date