



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. Please complete each of the yellow highlighted fields. 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
\$1,000,000.00	U120 - Department of Transportation	N. Poinsett Highway Project

Organization Information

Entity Name	City of Travelers Rest
Address	125 Trailblazer Drive
City/State/Zip	Travelers Rest, SC 29690
Website	
Tax ID#	57-6007217
Entity Type	Municipality

Organization Contact Information

Name	Shannon Herman
Position/Title	City Administrator
Telephone	864.834.8740
Email	shannon@travelersrestsc.com

Reporting Period

Reporting Period	Q3: January - March, 2026
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Accounting of how the funds have been spent:


Description	Original Budget (Earmark Amount)	FY 24-25 Expenditures	FY 25-26 Expenditures					Total	Balance
			Quarter 1	Quarter 2	Quarter 3	Quarter 4			
N. Poinsett Improvements	\$1,000,000.00	\$682,943.51	\$0.00	\$0.00	\$0.00		\$0.00	\$317,056.49	
							\$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	\$1,000,000.00	\$682,943.51	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$317,056.49	

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
 Shannon M. Herman
 Printed Name


 Title
 City Administrator
 6/15/26
 Date