



## State of South Carolina Request for Contribution Distribution

This form is designed to collect the information required by South Carolina in accordance with Proviso 117.21 of the appropriations act and Executive Order 2022-19. This form must be submitted to the state agency that is providing the contribution for the designated organization. The state agency providing the contribution should use this form to collect information from the designated organization. The information must be collected from the designated organization before the funds can be disbursed.

### Contribution Information

Amount	State Agency Providing the Contribution	Purpose
\$500,000.00	J200 - Department of Alcohol and Other Drug Abuse Services	Youth and Community Intervention; Stop the Cycle - Community Support Services

### Organization Information

Entity Name	Palmetto Foundation for Prevention and Recovery
Address	105 Snapdragon Ct Ste B
City/State/Zip	Chapin, SC 29036
Website	palmettofoundation.org
Tax ID#	82-3037726
Entity Type	Nonprofit Organization

### Organization Contact Information

Contact Name	Mary Grace Loveless
Position/Title	Executive Director
Telephone	803-200-1993 (o) 803-312-5517 (c)
Email	<a href="mailto:director@palmettofoundation.org">director@palmettofoundation.org</a>

### Plan/Accounting of how these funds will be spent:

Description	Budget	Explanation
Lexington Richland School District Five Approved After-School Partnerships	\$84,790.00	Community services and activities such as those offered through the Irmo Chapin Recreation Commission
Lexington Richland School District Five Approved After-School Programming	\$134,000	Community services and activities such as those offered through the Irmo Chapin Recreation Commission
Walker White Apprenticeship Program	\$100,000.00	Paid apprenticeship program for students that qualify
Fuel / Bus Maintenance	\$8,400.00	Transportation to and from services
Bus Driver / Security	\$5,670.00	Transportation to and from services
Instructional Supplies / Equipment / Technology	\$6,000.00	After school and summer supplies, office supplies, misc expenses
Curriculum	\$4,800.00	After school and summer supplies
Printing	\$5,340.00	After school and summer supplies
Food / Food Prep	\$96,000.00	After school and summer supplies
Supplemental Staff	\$45,000.00	Staffing to oversee program
Evaluation / Proof of Concept	\$10,000.00	USC College of Education or other professional program evaluation service
<b>Grand Total</b>	<b>\$500,000.00</b>	

### Please explain how these funds will be used to provide a public benefit:

This area is a high-risk, low-income area with a majority of single parent apartments. This specific apartment complex (Harbison Gardens) is a hot spot for youth to fall through the cracks, specifically during after school hours. Through community partnerships, these at-risk youth are provided opportunities to stop the cycle of poor academic performance and behavioral issues. Youth will be encouraged to not participate in drug use, gangs, and crime through access to recreational sports, mentorships, tutoring assistance, empowerment programs, apprenticeship opportunities, and transportation to access these services. The Irmo area is plagued with crime, violence, and danger which impacts the community and surrounding areas. Through partnerships with the apartment complex management company, Lexington Richland School District Five, the Mungo Foundation, Irmo Chapin Recreation Commission, and apprenticeship programs such as Walker White Mechanical, this area can be turned around to benefit the community, save youth, and provide a route away from a life of destruction. To qualify for low-income housing, youth residing in the apartment complex will be required to participate in the provided services. This project is an example for other areas of the state to implement and see success across communities, in schools, and in the lives of the next generation.

### Organization Certifications

- 1) Organization hereby gives assurance that no person shall, upon the grounds of race, creed, color, or national origin, be excluded from participation in, be denied the benefit of, or be otherwise subjected to discrimination under any program or activity for which this organization is responsible.
- 2) Organization certifies that it will provide quarterly spending reports to the Agency Providing Contribution listed above.
- 3) Organization certifies that it will provide an accounting at the end of the fiscal year to the Agency Providing Contribution listed above.
- 4) Organization certifies that it will allow the State Auditor to audit or cause to be audited the contributed funds.

Mary Grace Loveless

Organization Signature

Executive Director

Title

Mary Grace Loveless

Printed Name

September 19, 2024

Date

### Certifications of State Agency Providing Contribution

- 1) State Agency certifies that the planned expenditure aligns with the Agency's mission and/or the purpose specified in the appropriations act.
- 2) State Agency certifies that the Organization has set forth a public purpose to be served through receipt of the expenditure.
- 3) State Agency certifies that it will make distributions directly to the organization.
- 4) State Agency certifies that it will provide the quarterly spending reports and accounting received from the organization to the Senate Finance Committee, House Ways and Means Committee, and the Executive Budget Office by June 30, 2025.
- 5) State Agency certifies that it will publish on their website any and all reports, accountings, forms, updates, communications, or other materials required by Proviso 117.21 of the appropriations act.
- 6) State Agency will certify to the Office of the Governor that it has complied with the requirements of Executive Order 2022-19 by June 30, 2025.

Sara Goldsby

Agency Head Signature

26-Sep-24

Date

Sara Goldsb

Printed Name

## 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 and Executive Order 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, 2025.

### Contribution Information

Amount	State Agency Providing the Contribution	Purpose
\$500,000.00	J200 - Department of Alcohol and Other Drug Abuse Service	

### Organization Information

Entity Name	Palmetto Foundation for Prevention & Recovery
Address	105 Snapdragon Ct, Suite B
City/State/Zip	Chapin, SC 29036
Website	palmettofoundation.org
Tax ID#	823037726
Entity Type	Nonprofit Organization

### Organization Contact Information

Name	Mary Grace Loveless
Position/Title	Executive Director
Telephone	803-200-1933
Email	<a href="mailto:admin@palmettofoundation.org">admin@palmettofoundation.org</a>

### Reporting Period

Reporting Period	Quarter 1: July 1, 2024 - September 30, 2024
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### Accounting of how the funds have been spent:

Description <i>(Attach additional detail for subgrantees and affiliated nonprofits)</i>	Budget	Expenditures					Total	Balance
		Quarter 1	Quarter 2	Quarter 3	Quarter 4			
Liability insurance	\$1,000.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$1,000.00	
Midlands Mechanical Apprentice Coalition	\$100,000.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$100,000.00	
Lexington Richland School District Five Approved Partnerships	\$84,790.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$84,790.00	
Lexington Richland School District Five Approved Programming	\$134,000.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$134,000.00	
Fuel/Bus Maintenance	\$8,400.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$8,400.00	
Bus Driver/Security	\$5,670.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$5,670.00	
Instructional Supplies/Equipment/Technology	\$6,000.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$6,000.00	
Curriculum	\$4,800.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$4,800.00	
Printing	\$4,340.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$4,340.00	
Food/Food Prep	\$96,000.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$96,000.00	
Supplemental Staff	\$45,000.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$45,000.00	
Evaluation/Proof of Concept	\$10,000.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$10,000.00	
<b>Grand Total</b>	<b>\$500,000.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$500,000.00</b>	

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

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### 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.

Mary Grace Loveless

Executive Director

Signature

Mary Grace Loveless

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Printed Name

Title

15-Jan-25

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Date



# 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 and Executive Order 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, 2025.

## Contribution Information

Amount	State Agency Providing the Contribution	Purpose
\$500,000.00	J200 - Department of Alcohol and Other Drug Abuse Services	Community Support Services

## Organization Information

Entity Name	Palmetto Foundation for Prevention & Recovery
Address	105 Snapdragon Ct, Suite B
City/State/Zip	Chapin, SC 29036
Website	palmettofoundation.org
Tax ID#	823037726
Entity Type	Nonprofit Organization

## Organization Contact Information

Name	Mary Grace Loveless
Position/Title	Executive Director
Telephone	803-200-1933
Email	<a href="mailto:admin@palmettofoundation.org">admin@palmettofoundation.org</a>

## Reporting Period

Reporting Period	Quarter 2: October 1, 2024 - December 30, 2024
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## Accounting of how the funds have been spent:

Description <i>(Attach additional detail for subgrantees and affiliated nonprofits)</i>	Budget	Expenditures					Total	Balance
		Quarter 1	Quarter 2	Quarter 3	Quarter 4			
Liability insurance	\$1,000.00	\$0.00	\$770.00	\$0.00	\$0.00	\$770.00	\$230.00	
Midlands Mechanical Apprentice Coalition	\$100,000.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$100,000.00	
Lexington Richland School District Five Approved Partnerships (Youth Mentorship Program)	\$84,790.00	\$0.00	\$1,300.00	\$0.00	\$0.00	\$1,300.00	\$83,490.00	
Lexington Richland School District Five Approved Programming (Youth Empowerment Camps)	\$134,000.00	\$0.00	\$4,000.00	\$0.00	\$0.00	\$4,000.00	\$130,000.00	
Fuel/Bus Maintenance	\$8,400.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$8,400.00	
Bus Driver/Security	\$5,670.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$5,670.00	
Instructional Supplies/Equipment/Technology	\$6,000.00	\$0.00	\$3,516.00	\$0.00	\$0.00	\$3,516.00	\$2,484.00	
Curriculum	\$4,800.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$4,800.00	
Printing	\$4,340.00	\$0.00	\$227.93	\$0.00	\$0.00	\$227.93	\$4,112.07	
Food/Food Prep	\$96,000.00	\$0.00	\$433.76	\$0.00	\$0.00	\$433.76	\$95,566.24	
Supplemental Staff	\$45,000.00	\$0.00	\$11,250.00	\$0.00	\$0.00	\$11,250.00	\$33,750.00	
Evaluation/Proof of Concept	\$10,000.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$10,000.00	
<b>Grand Total</b>	<b>\$500,000.00</b>	<b>\$0.00</b>	<b>\$21,497.69</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$21,497.69</b>	<b>\$478,502.31</b>	

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

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## 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.

Mary Grace Loveless

Executive Director

Signature

Mary Grace Loveless

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Printed Name

Title

1.15.25

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Date



# 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 and Executive Order 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, 2025.

## Contribution Information

Amount	State Agency Providing the Contribution	Purpose
\$500,000.00	J200 - Department of Alcohol and Other Drug Abuse Services	Community Support Services

## Organization Information

Entity Name	Palmetto Foundation for Prevention & Recovery
Address	105 Snapdragon Ct, Suite B
City/State/Zip	Chapin, SC 29036
Website	palmettofoundation.org
Tax ID#	823037726
Entity Type	Nonprofit Organization

## Organization Contact Information

Name	Mary Grace Loveless
Position/Title	Executive Director
Telephone	803-200-1933
Email	<a href="mailto:admin@palmettofoundation.org">admin@palmettofoundation.org</a>

## Reporting Period

Reporting Period	Quarter 3: January 1, 2025 - March 31, 2025
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## Accounting of how the funds have been spent:

Description <i>(Attach additional detail for subgrantees and affiliated nonprofits)</i>	Budget	Expenditures					Total	Balance
		Quarter 1	Quarter 2	Quarter 3	Quarter 4			
Liability insurance	\$1,000.00	\$0.00	\$770.00	\$0.00	\$0.00	\$770.00	\$230.00	
Midlands Mechanical Apprentice Coalition	\$100,000.00	\$0.00	\$0.00	\$50,000.00	\$0.00	\$50,000.00	\$50,000.00	
Lexington Richland School District Five Approved Partnerships (Youth Mentorship Program)	\$84,790.00	\$0.00	\$1,300.00	\$6,463.16	\$0.00	\$7,763.16	\$77,026.84	
Lexington Richland School District Five Approved Programming (Youth Empowerment Camps)	\$134,000.00	\$0.00	\$4,000.00	\$3,450.00	\$0.00	\$7,450.00	\$126,550.00	
Fuel/Bus Maintenance	\$8,400.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$8,400.00	
Bus Driver/Security	\$5,670.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$5,670.00	
Instructional Supplies/Equipment/Technology	\$6,000.00	\$0.00	\$3,516.00	\$2,498.00	\$0.00	\$6,014.00	-\$14.00	
Curriculum	\$4,800.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$4,800.00	
Printing	\$4,340.00	\$0.00	\$227.93	\$442.70	\$0.00	\$670.63	\$3,669.37	
Food/Food Prep	\$96,000.00	\$0.00	\$433.75	\$0.00	\$0.00	\$433.75	\$95,566.25	
Supplemental Staff	\$45,000.00	\$0.00	\$11,250.00	\$11,250.00	\$0.00	\$22,500.00	\$22,500.00	
Evaluation/Proof of Concept	\$10,000.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$10,000.00	
<b>Grand Total</b>	<b>\$500,000.00</b>	<b>\$0.00</b>	<b>\$21,497.68</b>	<b>\$74,103.86</b>	<b>\$0.00</b>	<b>\$95,601.54</b>	<b>\$404,398.46</b>	

## 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.

Mary Grace Loveless

Executive Director

Signature

Mary Grace Loveless

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Printed Name

Title

6.9.25

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Date

## 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 and Executive Order 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, 2025.

### Contribution Information

Amount	State Agency Providing the Contribution	Purpose
\$500,000.00	J200 - Department of Alcohol and Other Drug Abuse Services	Community Support Services / Apprenticeship Pipeline Partnership

### Organization Information

Entity Name	Palmetto Foundation for Prevention & Recovery
Address	105 Snapdragon Ct, Suite B
City/State/Zip	Chapin, SC 29036
Website	palmettofoundation.org
Tax ID#	823037726
Entity Type	Nonprofit Organization

### Organization Contact Information

Name	Mary Grace Loveless
Position/Title	Executive Director
Telephone	803-200-1933
Email	<a href="mailto:admin@palmettofoundation.org">admin@palmettofoundation.org</a>

### Reporting Period

Reporting Period	Quarter 4: April 1, 2025 - June 30, 2025
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### Accounting of how the funds have been spent:

Description <i>(Attach additional detail for subgrantees and affiliated nonprofits)</i>	Budget	Expenditures					Total	Balance
		Quarter 1	Quarter 2	Quarter 3	Quarter 4			
Liability insurance	\$1,000.00	\$0.00	\$770.00	\$0.00	\$0.00	\$770.00	\$230.00	
Midlands Mechanical Apprentice Coalition	\$100,000.00	\$0.00	\$0.00	\$50,000.00	\$50,000.00	\$100,000.00	\$0.00	
Lexington Richland School District Five Approved Partnerships	\$84,790.00	\$0.00	\$1,300.00	\$6,463.16	\$0.00	\$7,763.16	\$77,026.84	
Lexington Richland School District Five Approved Programming	\$134,000.00	\$0.00	\$4,000.00	\$3,450.00	\$2,150.00	\$9,600.00	\$124,400.00	
Fuel/Bus Maintenance	\$8,400.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$8,400.00	
Bus Driver/Security	\$5,670.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$5,670.00	
Instructional Supplies/Equipment/Technology	\$6,000.00	\$0.00	\$3,516.00	\$2,498.00	\$143.50	\$6,157.50	-\$157.50	
Curriculum	\$4,800.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$4,800.00	
Printing	\$4,340.00	\$0.00	\$227.93	\$442.70	\$144.76	\$815.39	\$3,524.61	
Food/Food Prep	\$96,000.00	\$0.00	\$433.76	\$0.00	\$0.00	\$0.00	\$96,000.00	
Supplemental Staff	\$45,000.00	\$0.00	\$11,250.00	\$11,250.00	\$11,250.00	\$33,750.00	\$11,250.00	
Evaluation/Proof of Concept	\$10,000.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$10,000.00	
<b>Grand Total</b>	<b>\$500,000.00</b>	<b>\$0.00</b>	<b>\$21,497.69</b>	<b>\$74,103.86</b>	<b>\$63,688.26</b>	<b>\$158,856.05</b>	<b>\$341,143.95</b>	

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

Received funding on October 24, 2024. Programming is on going.

### 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.

Mary Grace Loveless

Executive Director

Signature

Mary Grace Loveless

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Printed Name

Title

27-Jun-25

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Date



### State of South Carolina Request for Contribution Distribution

This form is designed to collect the information required by South Carolina in accordance with Proviso 117.21 of the appropriations act and Executive Order 2022-19. This form must be submitted to the state agency that is providing the contribution for the designated organization. The state agency providing the contribution should use this form to collect information from the designated organization. The information must be collected from the designated organization before the funds can be disbursed.

Contribution Information		
Amount	State Agency Providing the Contribution	Purpose
\$800,000.00	J200 - Department of Alcohol and Other Drug Abuse Se	Opioid and fentanyl prevention, education, and awareness campaign and materials and community drug disposal resources

Organization Information	
Entity Name	South Carolina Athletic Coaches Association Inc.
Address	2005 North Main Street
City/State/Zip	Anderson, SC 29621
Website	<a href="https://www.sccoaches.org">https://www.sccoaches.org</a>
Tax ID#	57-07113374
Entity Type	Nonprofit Organization

Organization Contact Information	
Contact Name	Scott Earley/Cindy Jacobs
Position/Title	Executive Director/Assistant Director
Telephone	803-237-0115/864-200-9449
Email	<a href="mailto:scott@sccoaches.org">scott@sccoaches.org</a> / <a href="mailto:cindy@sccoaches.org">cindy@sccoaches.org</a>

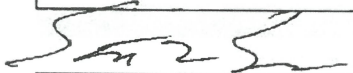
Plan/Accounting of how these funds will be spent:		
Description	Budget	Explanation
Community Drug Disposal Campaign and Materials	\$193,042.00	Distribution of In-Home Drug Disposal Kits to Parents and Schools
Tackle Fentanyl Prevention Campaign and Materials	\$336,250.00	Printed and Electronic Prevention and Education Materials and Distribution
Training for Coaches	\$144,500.00	In Person Training, Training Coordination, and Training Materials for 9,000+ Coaches
SCACA Staffing and Administration	\$45,000.00	Part Time FTE for Middle School and High School Coordinators
Statewide Awareness Campaign and Digital Materials	\$81,208.00	Public Address Announcements, Video PSAs, Static Ads Statewide
<b>Grand Total</b>	<b>\$800,000.00</b>	

Please explain how these funds will be used to provide a public benefit:

The South Carolina Athletic Coaches Association's Coaches vs. Overdoses initiative and Tackle Fentanyl campaign includes over 9,000 coaches across all sports at over 269 high schools in all 46 counties. The campaign provides training and resources for coaches, enabling them to directly offer prevention, education, awareness, and community drug disposal resources to over 124,996 parents statewide. It also reaches 98,996 student-athletes and raises awareness among more than 300,000 community members. The campaign includes hosting Coaches vs. Overdoses games at every high school across the state for various sports, PSAs featuring coaches, sports legends, and prevention experts, and materials which provide access to facts, figures, naloxone, drug disposal, and various resources proven effective in reaching parents and student athletes in order to decrease overdoses and save lives.

Organization Certifications

- 1) Organization hereby gives assurance that no person shall, upon the grounds of race, creed, color, or national origin, be excluded from participation in, be denied the benefit of, or be otherwise subjected to discrimination under any program or activity for which this organization is responsible.
- 2) Organization certifies that it will provide quarterly spending reports to the Agency Providing Contribution listed above.
- 3) Organization certifies that it will provide an accounting at the end of the fiscal year to the Agency Providing Contribution listed above.
- 4) Organization certifies that it will allow the State Auditor to audit or cause to be audited the contributed funds.



Organization Signature

Executive Dir

Title

Scott L Farley

Printed Name

9-25-24

Date

Certifications of State Agency Providing Contribution

- 1) State Agency certifies that the planned expenditure aligns with the Agency's mission and/or the purpose specified in the appropriations act.
- 2) State Agency certifies that the Organization has set forth a public purpose to be served through receipt of the expenditure.
- 3) State Agency certifies that it will make distributions directly to the organization.
- 4) State Agency certifies that it will provide the quarterly spending reports and accounting received from the organization to the Senate Finance Committee, House Ways and Means Committee, and the Executive Budget Office by June 30, 2024.
- 5) State Agency certifies that it will publish on their website any and all reports, accountings, forms, updates, communications, or other materials required by Proviso 117.21 of the appropriations act.
- 6) State Agency will certify to the Office of the Governor that it has complied with the requirements of Executive Order 2022-19 by June 30, 2024.



Agency Head Signature

10/8/24

Date

Susan Goldstein

Printed Name



# 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 and Executive Order 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, 2025.

## Contribution Information

Amount	State Agency Providing the Contribution	Purpose
\$800,000.00	J200 - Department of Alcohol and Other Drug Abuse Services	Opioid and fentanyl prevention, education, and awareness campaign and materials and community drug

## Organization Information

Entity Name	South Carolina Athletic Coaches Association Inc.
Address	2005 North Main Street
City/State/Zip	Anderson, SC 29621
Website	<a href="https://www.sccoaches.org">https://www.sccoaches.org</a>
Tax ID#	57-07113374
Entity Type	Nonprofit Organization

## Organization Contact Information

Name	Scott Earley/ Cindy Jacobs
Position/Title	Executive Director/Assistant Director
Telephone	803-237-0115/864-200-9449
Email	<a href="mailto:scott@sccoaches.org">scott@sccoaches.org</a> / <a href="mailto:cindy@sccoaches.org">cindy@sccoaches.org</a>

## Reporting Period

Reporting Period	Quarter 2: October 1, 2024 - December 30, 2024
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## Accounting of how the funds have been spent:

Description <i>(Attach additional detail for subgrantees and affiliated nonprofits)</i>	Budget	Expenditures					Balance
		Quarter 1	Quarter 2	Quarter 3	Quarter 4	Total	
Safety Blitz- paying for the Drug Disposal Campaign and Materials	\$193,042.00		\$193,042.00			\$193,042.00	\$0.00
Safety Blitz- paying for the playbooks to give to every athletic	\$336,250.00		\$336,250.00			\$336,250.00	\$0.00
Safety Blitz-video, public address announcements	\$81,208.00		\$59,748.50			\$59,748.50	\$21,459.50
Statewide Awareness, Digital Material- Delta Air Lines Dallas	\$21,459.50		\$949.95			\$949.95	\$20,509.55
						\$0.00	\$0.00
						\$0.00	\$0.00
						\$0.00	\$0.00
						\$0.00	\$0.00
						\$0.00	\$0.00
<b>Grand Total</b>	<b>\$631,959.50</b>	<b>\$0.00</b>	<b>\$589,990.45</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$589,990.45</b>	<b>\$41,969.05</b>

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

The unspent funds are all budget out to spend June 1st

## 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.

Cindy Jacobs  
Signature  
Cindy Jacobs  
Printed Name

Assistant Director  
Title  
2/1/25  
Date



# 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 and Executive Order 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, 2025.

## Contribution Information

Amount	State Agency Providing the Contribution	Purpose
\$800,000.00	J200 - Department of Alcohol and Other Drug Abuse Service	Opioid and fentanyl prevention, education, and awareness campaign and materials and community drug

## Organization Information

Entity Name	South Carolina Athletic Coaches Association Inc.
Address	2005 North Main Street
City/State/Zip	Anderson, SC 29621
Website	<a href="https://www.sccoaches.org">https://www.sccoaches.org</a>
Tax ID#	57-07113374
Entity Type	Nonprofit Organization

## Organization Contact Information

Name	Scott Earley/ Cindy Jacobs
Position/Title	Executive Director/Assistant Director
Telephone	803-237-0115/864-200-9449
Email	<a href="mailto:scott@sccoaches.org">scott@sccoaches.org</a> / <a href="mailto:cindy@sccoaches.org">cindy@sccoaches.org</a>

## Reporting Period

Reporting Period	Quarter 3: January 1, 2025 - March 31, 2025
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## Accounting of how the funds have been spent:

Description <i>(Attach additional detail for subgrantees and affiliated nonprofits)</i>	Budget	Expenditures					Balance
		Quarter 1	Quarter 2	Quarter 3	Quarter 4	Total	
SCACA Staffing and Administration- to go to the high schools, middle schools	\$45,000.00			\$45,000.00		\$45,000.00	\$0.00
Sealevel Social- Company posted all pictures on social media Statewide awarene	\$5,900.00			\$5,900.00		\$5,900.00	\$0.00
Material training Coaches- BSN and The Fold	\$144,500.00			\$1,284.34		\$1,284.34	\$143,215.66
						\$0.00	\$0.00
						\$0.00	\$0.00
						\$0.00	\$0.00
						\$0.00	\$0.00
						\$0.00	\$0.00
						\$0.00	\$0.00
<b>Grand Total</b>	<b>\$195,400.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$52,184.34</b>	<b>\$0.00</b>	<b>\$52,184.34</b>	<b>\$143,215.66</b>

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

The unspent funds are all budget out to spend 1st of June

## 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.

*Cindy Jacobs*

Signature

Cindy Jacobs

Printed Name

*Assistant Director*

Title

*4/11/25*

Date



## State of South Carolina Request for Contribution Distribution

This form is designed to collect the information required by South Carolina in accordance with Proviso 117.21 of the appropriations act and Executive Order 2022-19. This form must be submitted to the state agency that is providing the contribution for the designated organization. The state agency providing the contribution should use this form to collect information from the designated organization. The information must be collected from the designated organization before the funds can be disbursed.

### Contribution Information

Amount	State Agency Providing the Contribution	Purpose
\$300,000.00	J200 - Department of Alcohol and Other Drug Abuse Services	Facilitation of school-based drug prevention for middle school students in five Upstate counties.

### Organization Information

Entity Name	RIZE Prevention
Address	850 S. Pleasantburg Dr., Suite 202
City/State/Zip	Greenville, SC 29607
Website	<a href="http://rizeprevention.org">rizeprevention.org</a>
Tax ID#	87-1458544
Entity Type	Nonprofit Organization

### Organization Contact Information

Contact Name	Martine Helou-Allen
Position/Title	Executive Director
Telephone	864-236-1233
Email	<a href="mailto:martineh@rizeprevention.org">martineh@rizeprevention.org</a>

### Plan/Accounting of how these funds will be spent:

Description	Budget	Explanation
Full-Time iRIZE Program Student Liaison (3)	\$130,100.00	The primary liaisons/mentors for students at our iRIZE schools. They dedicate 100% of their time to scheduling, coordinating, attending all iRIZE events and mentoring visits. Coordinate with Administrative Manager or Community Connector-related needs for students.
iRIZE Program Lead	\$60,000.00	Executive Director of RIZE Prevention and oversees iRIZE. Spends 80% of time hiring, supervising and training iRIZE staff, as well as conducting or co-hosting all program presentations, coaching students and parents, and overseeing the Community Connector.
Administrative Manager / iRIZE Program Coordinator	\$55,000.00	Spends 90% of time coordinating all Community Connector-related events and outreach processes, attending parent engagement nights, and communicating with school counselors/in-school therapist, and attending visits with parents.
Part-Time iRIZE Student Liaison (Hispanic Community Coordinator)	\$18,000.00	Supplementary liaisons/mentors for students at our iRIZE schools. PT Student Liaisons are a critical support to fulfill regular school visits and mentoring needs. These liaisons dedicate 100% his/her time to this role in coordination with FT liaisons. The Hispanic Community Coordinator acts as the primary Hispanic Student Liaison in the schools, and also offers presentations for the Hispanic community and student coaching for Spanish-Speaking students.

Part-Time iRIZE Student Liaison (Peer Support Specialist)	\$12,000.00	Supplementary liaisons/mentors for students at our iRIZE schools. PT Student Liaisons are a critical support to fulfill regular school visits and mentoring needs. These liaisons dedicate 100% his/her time to this role in coordination with FT liaisons. The Peer Support Specialist Student Liaison offers group coaching sessions in iRIZE schools to offer additional support and resources for students.
iRIZE Program Transportation	\$3,500.00	Transportation costs including driving costs to and from iRIZE program school visits and company car maintenance.
iRIZE Program Supplies	\$7,000.00	Program supplies including iRIZE pledge printing, student iRIZE Club membership cards, contact support cards, iRIZE program info cards, and all parental promotional materials. iRIZE information cards are given to students, parents, teachers, and staff in iRIZE schools. These cards contain information regarding iRIZE and RIZE Prevention.
Marketing & Communications	\$7,200.00	Marketing and communications to enhance community awareness and effective promotion of the iRIZE program to drive utilization of resources. Marketing and communications include website development and maintenance, social media content creation, advertising (print materials/digital advertising) and technology tools.
After Hours Coaching & Community Connector Outreach Support	\$7,200.00	After-hours adolescent addiction and motivation coaching for students in need of extra support and RIZE Prevention's Community Connector resource guide outreach support for parents. This outreach support includes the coordination of student coaching and financial aid award, and resources for students and parents.
<b>Grand Total</b>	<b>\$300,000.00</b>	

**Please explain how these funds will be used to provide a public benefit:**

These funds will be used to provide the iRIZE middle school teen drug prevention program to over 18 middle schools across five counties in the Upstate, including six Title I schools. The iRIZE school-based drug prevention program offers invaluable character development tools for adolescents and equips them with knowledge and resilience during their formative years. By addressing the complexities of drug use in an accessible environment, this program creates an atmosphere of awareness and open dialogue. It empowers students with factual information, debunks myths, and fosters critical thinking skills and resiliency. Additionally, this program teaches coping mechanisms and decision-making skills, motivating adolescents to face peer pressures confidently. Beyond mere deterrence, this program instills a powerful sense of community and belonging, reducing feelings of isolation and disconnectedness that may lead to drug use. Additionally, this funding gives the ability for RIZE Prevention to offer one-on-one student adolescent addiction and motivation coaching, school-based group coaching sessions, and parent resources.

**Organization Certifications**

1) Organization hereby gives assurance that no person shall, upon the grounds of race, creed, color, or national origin, be excluded from participation in, be denied the benefit of, or be otherwise subjected to discrimination under any program or activity for which this organization is responsible.

- 2) Organization certifies that it will provide quarterly spending reports to the Agency Providing Contribution listed above.
- 3) Organization certifies that it will provide an accounting at the end of the fiscal year to the Agency Providing Contribution listed above.
- 4) Organization certifies that it will allow the State Auditor to audit or cause to be audited the contributed funds.



Organization Signature

Executive Director

Title

Martine Helou-Allen

Printed Name

September 24, 2024

Date

### Certifications of State Agency Providing Contribution

- 1) State Agency certifies that the planned expenditure aligns with the Agency's mission and/or the purpose specified in the appropriations act.
- 2) State Agency certifies that the Organization has set forth a public purpose to be served through receipt of the expenditure.
- 3) State Agency certifies that it will make distributions directly to the organization.
- 4) State Agency certifies that it will provide the quarterly spending reports and accounting received from the organization to the Senate Finance Committee, House Ways and Means Committee, and the Executive Budget Office by June 30, 2024.
- 5) State Agency certifies that it will publish on their website any and all reports, accountings, forms, updates, communications, or other materials required by Proviso 117.21 of the appropriations act.
- 6) State Agency will certify to the Office of the Governor that it has complied with the requirements of Executive Order 2022-19 by June 30, 2024.



Agency Head Signature

10/8/2024

Date



Printed Name



# 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 and Executive Order 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, 2025.

## Contribution Information

Amount	State Agency Providing the Contribution	Purpose
\$300,000.00	J200 - Department of Alcohol and Other Drug Abuse Services	Facilitation of school-based drug prevention for middle school students in five Upstate counties.

## Organization Information

Entity Name	RIZE Prevention
Address	850 S. Pleasantburg Dr. Suite 202
City/State/Zip	Greenville, SC 29607
Website	rizeprevention.org
Tax ID#	87-1458544
Entity Type	Nonprofit Organization

## Organization Contact Information

Name	Martine Helou-Allen
Position/Title	Executive Director
Telephone	864-236-1233
Email	<a href="mailto:martineh@rizeprevention.org">martineh@rizeprevention.org</a>

## Reporting Period

Reporting Period	07/01/2024 to 06/30/2025
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## Accounting of how the funds have been spent:

Description <i>(Attach additional detail for subgrantees and affiliated nonprofits)</i>	Budget	Expenditures					Total	Balance
		Quarter 1	Quarter 2	Quarter 3	Quarter 4			
iRIZE Progrm Lead Salaries	\$60,000.00	\$13,068.00	\$15,246.00			\$28,314.00	\$31,686.00	
Other iRIZE Program Salaries & Wages, including payroll taxes	\$215,100.00	\$28,337.76	\$42,281.78			\$70,619.54	\$144,480.46	
iRIZE Program Transportation	\$3,500.00	\$276.79	\$283.28			\$560.07	\$2,939.93	
iRIZE Program Supplies	\$7,000.00	\$200.04				\$200.04	\$6,799.96	
Other program support services	\$14,400.00	\$6,230.76	\$7,269.22			\$13,499.98	\$900.02	
						\$0.00	\$0.00	
						\$0.00	\$0.00	
						\$0.00	\$0.00	
						\$0.00	\$0.00	
<b>Grand Total</b>	<b>\$300,000.00</b>	<b>\$48,113.35</b>	<b>\$65,080.28</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$113,193.63</b>	<b>\$186,806.37</b>	

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

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## 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

\_\_\_\_\_  
Title

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Date



## State of South Carolina Request for Contribution Distribution

This form is designed to collect the information required by South Carolina in accordance with Proviso 117.21 of the appropriations act and Executive Order 2022-19. This form must be submitted to the state agency that is providing the contribution for the designated organization. The state agency providing the contribution should use this form to collect information from the designated organization. The information must be collected from the designated organization before the funds can be disbursed.

### Contribution Information

Amount	State Agency Providing the Contribution	Purpose
#300,000.00	J200 - Department of Alcohol and Other Drug Abuse Services	Expansion of Recovery Services to the Midlands

### Organization Information

Entity Name	The Courage Center
Address	860 Park Road
City/State/Zip	Lexington, SC 29072
Website	couragecentersc.org
Tax ID#	35-2577034
Entity Type	Nonprofit Organization

### Organization Contact Information

Contact Name	Randall Rush
Position/Title	Executive Director
Telephone	803-381-2734
Email	randy@couragecentersc.org

### Plan/Accounting of how these funds will be spent:

Description	Budget	Explanation
Program Salaries	\$65,000.00	Peer support, family coaches, Program Manager
Administrative Salaries	\$130,680.00	Executive management, Operations, Communications and Events
Professional Services	\$19,560.00	Clinical supervision, consulting, contract counselors and therapists
Rent	\$14,760.00	Rent for Columbia and Orangeburg offices
Utilities	\$26,000.00	Electrical, internet, water, security
Insurance	\$28,000.00	Liability, E&O, commercial auto
Administrative Expenses	\$16,000.00	Software subscriptions, office supplies, etc.
<b>Grand Total</b>	<b>\$300,000.00</b>	

### Please explain how these funds will be used to provide a public benefit:

The Courage Center (TCC) provides a safe and supportive setting for individuals and families on their journey to recovery from substance misuse and substance use disorders. As a Recovery Community Organization (RCO), TCC provides recovery coaching by state certified peer support specialist with lived experience for individuals suffering from substance use. Family Coaches provide family support and coaching for the families of the affected person. TCC provides mutual aid meetings for young adults, individuals, and their families in Lexington, Chapin, and Columbia. TCC works with referral partners such as Prisma, Lexington Medical Center, Probation Pardon and Parole, Lexington EMS, Lexington Detention Center, Lexington 1 School District, the Lexington County Solicitor, Lutheran Services, and many more. In addition, TCC provides our participants access to both licensed and licensed seeking counselors in partnerships with University of South Carolina and other degree granting institutions. TCC also performs harm reduction activities through its mobile outreach and as a community distributor of Narcan. These funds will allow TCC to continue to expand its life affirming recovery services to the populations of Richland and Orangeburg counties. Community development work conducted in the previous year will now allow TCC to expand services with referral partners identified and relationships established. TCC has leased space to accommodate coaches and provide consistent space for training, education, and mutual aid in both Richland and Orangeburg counties. Funds will help outfit those locations and staff with peer support, clinical support and management, and administrative support.

### Organization Certifications

- 1) Organization hereby gives assurance that no person shall, upon the grounds of race, creed, color, or national origin, be excluded from participation in, be denied the benefit of, or be otherwise subjected to discrimination under any program or activity for which this organization is responsible.
- 2) Organization certifies that it will provide quarterly spending reports to the Agency Providing Contribution listed above.

- 3) Organization certifies that it will provide an accounting at the end of the fiscal year to the Agency Providing Contribution listed above.
- 4) Organization certifies that it will allow the State Auditor to audit or cause to be audited the contributed funds.



Executive Director

Title

Randy Rush

Printed Name

10/17/2024

Date

### Certifications of State Agency Providing Contribution

- 1) State Agency certifies that the planned expenditure aligns with the Agency's mission and/or the purpose specified in the appropriations act.
- 2) State Agency certifies that the Organization has set forth a public purpose to be served through receipt of the expenditure.
- 3) State Agency certifies that it will make distributions directly to the organization.
- 4) State Agency certifies that it will provide the quarterly spending reports and accounting received from the organization to the Senate Finance Committee, House Ways and Means Committee, and the Executive Budget Office by June 30, 2024.
- 5) State Agency certifies that it will publish on their website any and all reports, accountings, forms, updates, communications, or other materials required by Proviso 117.21 of the appropriations act.
- 6) State Agency will certify to the Office of the Governor that it has complied with the requirements of Executive Order 2022-19 by June 30, 2024.



Agency Head Signature

10/23/2024

Date

Sara Goldsby

Printed Name