



South Carolina Lieutenant Governor - Office on Aging

Agency Name:	The Oaks Adult Day Center		
LGOA GRANT Number:	ARC 15-04		
Grant Period:	July 1, 2014 through June 30, 2015		
Final:	Circle One:	YES	<u>NO</u>
Payment #:	4		
Payment Period:	October 1, 2014 to October 30, 2014	(Current Month, Day, Year)	
Payment Request Prepared by:	Jacque Curtin		

Functional Area	Grant Name		Local Share	ARCC Share
X2E00	SCARCC	SFY15	ALZHEIMER'S RESOURCE COORDINATION CENTER GRANT	
A	Current Grant Award		\$20,000.00	\$20,000.00
B	Actual Expenses Grant Period To Date (S + L)		\$6,666.68	\$6,666.68
C	Prior Funds Requested in Grant Period (S + L)		\$5,000.01	\$5,000.01
D	Total Request This Payment (B) - (C) (S + L)		\$1,666.67	\$1,666.67
E	State Share Requested (D)			\$1,666.67
F	Local Share Required (D)		\$1,666.67	
G	Year to Date Award Balance (A) - (C) - (D)		\$13,333.32	\$13,333.32
H	TOTAL STATE (E)			\$1,666.67

Under the penalties for perjury under State Law, I certify that this report is accurate and complete to the best of my knowledge and belief.

E-mail payment request to: financehelp@aging.sc.gov

Signature:	
Title:	CFO
Date:	November 14, 2014
Telephone Number:	803-535-1575