



South Carolina Lieutenant Governor - Office on Aging

Agency Name:	Goodwill Industries of Upstate/Midlands SC
LGOA GRANT Number:	GWDOL14
Grant Period:	July 1, 2014 through June 30, 2015
Final -	Circle One YES <u>NO</u>
Payment #:	#2
Payment Period:	July 27, 2014 through August 23, 2014
Payment Request Prepared by: Robyn Campbell	
Phone: 864-351-0139	

SENIOR COMMUNITY SERVICE EMPLOYMENT PROGRAM - TITLE V

		5B80 EW&F Federal (a)	5B81 OPC Federal (b)	5B82 ADM Federal (c)	5B83 MATCH Local (d)
A	Current Grant Award	\$474,091.00	\$69,133.00	\$51,971.00	\$66,133.00
B	Actual Expenses Year To Date	\$54,733.00	\$10,238.75	\$7,366.76	\$11,515.11
C	Prior Funds Requested Year to Date	\$22,395.87	\$4,057.16	\$3,198.02	\$4,825.43
D	Reimbursement Needed (Line B minus Line C)	\$32,337.13	\$6,181.59	\$4,168.74	\$6,689.68
E	Federal Share (Line D) 100%	\$32,337.13	\$6,181.59	\$4,168.74	
F	Local Share (Line D) 100%				\$6,689.68
G	Year to Date Award Balance (A)-(C)-(D)	\$419,358.00	\$58,894.25	\$44,604.24	\$54,617.89
H	TOTAL TO BE PAID BY GRANT ACTIVITY (Line E)	\$32,337.13	\$6,181.59	\$4,168.74	
I	TOTAL PAYMENT Line H ((a) + (b) + (c))	\$42,687.46			

Please sign, scan and e-mail Payment Requests to financehelp@aging.sc.gov

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.

Signature: Robyn Campbell

Title: Controller

Date: 9/10/14

Phone: 864-351-0139

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