

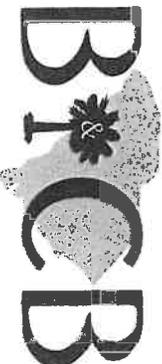
**DEPARTMENT OF HEALTH AND HUMAN SERVICES
OFFICE OF DIRECTOR**

ACTION REFERRAL

TO <i>Hess</i>	DATE <i>12-7-11</i>
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DIRECTOR'S USE ONLY	ACTION REQUESTED
1. LOG NUMBER <i>101215</i>	<input type="checkbox"/> Prepare reply for the Director's signature DATE DUE _____
2. DATE SIGNED BY DIRECTOR <i>Claud 12/19/11, letter attached.</i>	<input checked="" type="checkbox"/> Prepare reply for appropriate signature DATE DUE <i>12-16-11</i>
	<input type="checkbox"/> FOIA DATE DUE _____
	<input type="checkbox"/> Necessary Action

	APPROVALS <small>(Only when prepared for director's signature)</small>	APPROVE	* DISAPPROVE <small>(Note reason for disapproval and return to preparer.)</small>	COMMENT
1.				
2.				
3.				
4.				



NIKKI HALEY, CHAIR
GOVERNOR
CHRIS M. LOFTIS, JR.
STATE TREASURER
RICHARD ECKSTROM, CPA
COMPTROLLER GENERAL

SC BUDGET AND CONTROL BOARD

STATE FLEET MANAGEMENT
Warren J. McCormack
STATE FLEET MANAGER
(803) 737-0668
FAX: (803) 737-1160

HIGH K. LEATHERMAN, SR.
CHAIRMAN, SENATE FINANCE COMMITTEE
W. BRIAN WHITE
CHAIRMAN, HOUSE WAYS AND MEANS
COMMITTEE
MARCIA S. ADAMS
EXECUTIVE DIRECTOR

December 2, 2011

RECEIVED
DEC 06 2011

Department of Health & Human Services
OFFICE OF THE DIRECTOR

Mr. Anthony Keck
Department of Health and Human Services
1801 Main Street
Columbia, SC 29201

Reference: State Vehicle Tag # SG86995 Log#1212727

Dear Mr. Keck:

We recently received the enclosed information concerning possible misuse of a state-owned vehicle. State Fleet Management has been directed by the South Carolina Budget and Control Board to forward all customer concerns to the appropriate agency for review of the facts regarding the incident.

Please provide our office a copy of your findings. We may forward a copy of your response to the citizen originating this action. If I may provide any further assistance or clarification on this subject, please advise.

Respectfully,

A handwritten signature in dark ink, appearing to read 'Warren J. McCormack', written in a cursive style.

Warren J. McCormack
State Fleet Manager

WJM/vr

Enclosures:

Vehicle Incident Report Form

121222

State Budget and Control Board • General Services Division • State Fleet Management
 1026 Sumter Street, 2nd Floor • Columbia, SC 29201-3746
 Tel 803-737-0668 • Fax 803-737-1160

The State of South Carolina requires its employees to operate State vehicles in a safe and courteous fashion, obeying all transportation laws. Citizens who observe a State vehicle being operated improperly are asked to notify State Fleet Management of such incidents.

Please notify our office by completing the form below and sending it to the address listed at the top of this page. We will forward a copy of the complaint to the appropriate agency for an investigation of the incident to determine if corrective action is required.

We at State Fleet Management sincerely appreciate your interest and concern for the proper operation of the vehicles belonging to the State, and we thank you for your time and effort.

Date of Observation Date: 11.30.11 Time: 9:40 (AM) PM

Vehicle Identification (if known) License Tag No.: SE86995

Year: 1 Make: Aston Model: COBRA

Driver Identification (if known) Name: _____

Approximate Age: 55? Sex: F M Description: African American

Location of Incident (such as street, highway, intersection, direction of travel)
S.C. 302 / SC 118 Aiken . S.C.

Brief Description of Incident (please be specific; attach additional pages as necessary)
TWO GREEN MY VEHICLE ON TWO LANE STRAIGHT WAY 302 WEST BOUND SPEEDING TO ABOUT 45 MPH 302/118. RAIN ACCELERATION ON 118 WEST BOUND. CAR SWAY IN 45 MPH WHEN BRAKE I LOST VEHICLE ONE TO SPEED.

Please check the box at left to receive a copy of the Agency's response to this complaint. Although signature and address are optional, we can't give you a written response without an address or a fax number.

Signature: [Signature] Telephone: 803 648 0430

Name (please print): MITCH BERO Fax: 803 643 5659

Address: 1219 S. Sumner Ave S.E.

City: Aiken State: SC ZIP: 29801

SFM Use Only

Date of Call Date: _____ Time: _____ AM/PM Telephone: _____

Received by: Name: _____ Signature: _____

Owner	STATE OWNED	Vehicle owner	F16 B&C BD-STATE FLEET
Equipment Number	0A2CH50034	Owner Agency	MANAGEMENT
Tag Number	SG86995	Owner Division	129030
VIN #	1G1AL55F067863279	Agency Id	<input type="checkbox"/>
Vehicle Status	ACTIVE	Vehicle Leased?	<input type="checkbox"/>
Ordered Against	<input type="checkbox"/>		

Equipment Classification	SEDANCOMPACT	Model Year	2006
Class	A2 SEDAN, COMPACT	Make	CHEVROLET
Equipment Type	03 4-DOOR	Model	0A2CH5
Body Style	G GENERAL USE	Model No	CHEVROLET
Use Type	58431	Exterior Color	GRAY
Odometer	06/30/2011	Pass Capacity	5

Vehicle Current Location	J02	SC DEPARTMENT OF HEALTH AND HUMAN SERVICES	Contact Phone
SFM Location			Contact Cell
Agency			Contact Email
Division	CO40	COLUMBIA / RICHLAND	
Location Code			
Assignee		SUPPORT SERVICES	

Equipment Record

Fuel	UNLEADED	Motor Pool	NO	Warranty Information	W003 3 YEARS / 36000 MILES
Fuel Type		Motor Pool (Y/N)		Warr Code	
Secondary Fuel Type		Motor Pool Lease Type	COMPACT	Warranty (Years)	3 YEARS
Tank Size	0.00	Motor Pool		Warranty (Distance)	36000
Driver				Warranty Expiration	05/30/2009
Tag	SC SOUTH CAROLINA	Confidential Tag	<input type="checkbox"/>		
License State	SC SOUTH CAROLINA	License Expiration Date	//		
Date Tag Sent	//	Decal Exempt	<input type="checkbox"/>		
Prev Tag No					
Title Location	L1 SFM				

Linked Equipment Child Unit (Y/N)? This unit is a child unit - If checked Enter Parent ID

Parent Unit ID



208 letter 000215

December 19, 2011

Mr. Warren McCormack, State Fleet Manager
State Fleet Management
1026 Sumter Street, 2nd Floor
Columbia, S.C. 29201-3476

Re: Vehicle complaint on SG86995 - Log #1212727

Dear Mr. McCormack:

After an investigation of the reported incident, the driver of the above mention vehicle has been counseled regarding the nature of this complaint. The driver stated she will be mindful of speed limits and tailgating, however, with the nature of this complaint, she is scheduled to attend the Agency's next Defensive Driving Class.

Should you need any additional information or have any questions regarding our response, please do not hesitate to contact me directly at 898-2631.

Sincerely,


Robert M. Cannon, Program Director
Administrative Services

RMC: jym