

STATE OF SOUTH CAROLINA
COLLEGE/UNIVERSITY FINANCIAL
STATEMENT SPREADSHEETS
GENERAL INFORMATION FORM
JUNE 30, _____

Agency Code: _____
Institution Name: _____

Signatures of preparers of financial statement spreadsheets and forms:

	Signature	Title
1.		
2.		
3.		
4.		
5.		

Reviewer of spreadsheets and forms:

Signature: _____

Title: _____

Date of Review: _____

Person Office of the Comptroller General should contact regarding financial statement spreadsheets and forms:

Name: _____

Title: _____

Telephone Number: _____