

**FY 2015-16 Bank Account and Transparency Accountability Report
 FY 2016-17 Appropriation Act, Proviso 117.83**

Agency Name/Number: H730 SC Vocational Rehabilitation Department
Account Name: Work Center
Purpose of Account: To provide a stipend to SCVRD clients that participate in the Job Readiness Training Program

Exemption Requested: Yes No
If exemption is requested, reason:

Exemption Approved in Prior Year: Yes No

Authorized Personnel

Check Writing/Withdrawal:

Name: Denise Koon
 Title: Chief Financial Officer

Name: Dolores Powell
 Title: Client Stipend Payroll Supervisor

Reconciliation:

Name: Luanne Curry
 Title: Finance Operations Supervisor

Name: John Williams
 Title: Accountant III

Financial Information

Beginning Balance at July 1, 2015:

Detailed Transactions During FY 2015 -2016:

Deposits (Please list each deposit separately. Add lines as needed.)

DATE	Amount	Source
Total Deposits	7,782,330.53	Deposited weekly

Withdrawals: (Please list each withdrawal separately. Add lines as needed)

DATE	Amount	Payee	Description of Goods/Services Purchased
Total Expenditures	8,526,019.91	various clients	Stipend checks

Ending Balance at June 30, 2016:

**FY 2015-16 Bank Account and Transparency Accountability Report
 FY 2016-17 Appropriation Act, Proviso 117.83**

Agency Name/Number: H730 SC Vocational Rehabilitation Department
Account Name: Revolving Fund
Purpose of Account: The Revolving Fund is a special checking account maintained by the State Office to provide timely payments (usually one-time payments) of approved expenditures for applicants/clients.

Exemption Requested: Yes No
If exemption is requested, reason:

Exemption Approved in Prior Year: Yes No

Authorized Personnel

Check Writing/Withdrawal:

Name: Denise Koon
Title: Chief Financial Officer

Name: At least two from each Area office in the State
Title: Various Titles

Reconciliation:

Name: Leslie Shipp
Title: Accounting Tech III - Accounts Payable

Name: Luanne Curry
Title: Finance Operation Supervisor

Financial Information

Beginning Balance at July 1, 2015:

Detailed Transactions During FY 2015 -2016:

Deposits (Please list each deposit separately. Add lines as needed.)

DATE	Amount	Source
Total Deposits	2,359,240.82	Deposited daily

Withdrawals: (Plese list each withdrawal separately. Add lines as needed)

DATE	Amount	Payee	Description of Goods/Services Purchased
Total Expenditures	2,344,577.01	various	Checks written to clients for approved expenditures

Ending Balance at June 30, 2016:

**FY 2015-16 Bank Account and Transparency Accountability Report
 FY 2016-17 Appropriation Act, Proviso 117.83**

Agency Name/Number: H730 SC Vocational Rehabilitation Department
Account Name: Client Stipends
Purpose of Account: To provide a stipend to SCVRD clients that participate in the Job Readiness Training Program
 Account set up to begin using 07/2016 with new Client Stipends system

Exemption Requested: Yes No

If exemption is requested, reason:

The South Carolina Vocational Rehabilitation Department (SCVRD) is respectfully requesting an exemption from the reporting requirements concerning Proviso 117.83. The transactions involved in our reservoir bank accounts, which are managed by SCVRD, are directly related to the provision of client (the term "client" refers to a person with a disability who receives rehabilitation services from our agency) services. Each transaction associated with these accounts identifies our clients (the payees) by name. Releasing the names of the payees on the accounts and linking the transactions to the accountability and transparency website would violate Federal and State confidentiality laws protecting applicants, clients, and former clients of SCVRD.

34 C.F.R. Section 361.38(e) and S.C. Code Ann. Section 43-31-150 (1976) require written consent of the client or a court order before information may be released. Copies of the State & Federal provisions can be made available upon request. In addition, the Privacy Act of 1974, as amended at 5 U.S.C. 552a, protects records that can be retrieved from a system of records by personal identifiers such as a name, social security number, or other identifying number or symbol.

Our agency must follow Federal and State laws and regulations as they relate to confidentiality. These laws and regulations greatly restrict our ability to disclose personal information regarding applicants, clients, and former clients.

Exemption Approved in Prior Year: Yes No New Account est 02/2016

Authorized Personnel

Check Writing/Withdrawal:

Name: Denise Koon
 Title: Chief Financial Officer

Name: Dolores Powell
 Title: Client Stipend Payroll Supervisor

Reconciliation:

Name: Luanne Curry
 Title: Finance Operations Supervisor

Name: John Williams
 Title: Accountant III

Financial Information

Beginning Balance at July 1, 2015:

Detailed Transactions During FY 2015 -2016:

Deposits (Please list each deposit separately. Add lines as needed.)

DATE	Amount	Source
Total Deposits	750,000.00	Deposit 6/20/16 to set up new account

Withdrawals: (Plese list each withdrawal separately. Add lines as needed)

DATE	Amount	Payee	Description of Goods/Services Purchased
Total Expenditures	-	various clients	Stipend checks

Ending Balance at June 30, 2016: