

FY 2016-17 Bank Account and Transparency Accountability Report

Pursuant to Proviso 117.83 of the FY2017-18 Appropriations Act

Agency Name/Number: S.C. Department of Disabilities and Special Needs/J160
Account Name: Coastal Center - Acct No. xxxxxxxx8494 (Operating)
Purpose of Account: Client Funds

Exemption Requested: Yes No

If exemption is requested, reason:
 Previously granted 3/6/12

Exemption Approved in Prior Year: Yes No

Authorized Personnel

Check Writing/Withdrawal:

Name: John Dooney
 Title: District II HRM Director

Name: Richard Nickless
 Title: Service and Supply Director

Name: Barbara Taylor
 Title: Administrative Assistant to the Facilities

Name: Rebecca Hill
 Title: Facility Administrator

Name: James Harris
 Title: Director of Maintenance

Reconciliation:

Name: Lori McCurley
 Title: Director of Finance

Name: Edward Tustin
 Title: Fiscal Analyst III - Central Office

Financial Information

Beginning Balance at July 1, 2016:

Detailed Transactions During FY 2016 -2017:

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

DATE	Amount	Source
07/01/16 - 06/30/17	1,646,218.06	Summary of Deposits

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

DATE	Amount	Payee	Description of Goods/Services Purchased
07/01/16 - 06/30/17	1,649,568.96		Summary of Expenditures

Ending Balance at June 30, 2017:

FY 2016-17 Bank Account and Transparency Accountability Report

Pursuant to Proviso 117.83 of the FY2017-18 Appropriations Act

Agency Name/Number: S.C. Department of Disabilities and Special Needs/J160
Account Name: Coastal Center - Acct No. xxxxxxxxx9493 (Direct Deposit)
Purpose of Account: Client Funds

Exemption Requested: Yes No

If exemption is requested, reason:
 Previously granted 3/6/12

Exemption Approved in Prior Year: Yes No

Authorized Personnel

Check Writing/Withdrawal:

Name: John Dooney
 Title: District II HRM Director

Name: Richard Nickless
 Title: Service and Supply Director

Name: Barbara Taylor
 Title: Administrative Assistant to the Facilities

Name: Rebecca Hill
 Title: Facility Administrator

Name: James Harris
 Title: Director of Maintenance

Reconciliation:

Name: Lori McCurley
 Title: Director of Finance - Coastal

Name: Edward Tustin
 Title: Fiscal Analyst III - Central Office

Financial Information

Beginning Balance at July 1, 2016:

Detailed Transactions During FY 2016 -2017:

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

DATE	Amount	Source
07/01/16 - 06/30/17	1,604,778.56	Summary of Deposits

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

DATE	Amount	Payee	Description of Goods/Services Purchased
07/01/16 - 06/30/17	1,600,647.52		Summary of Expenditures

Ending Balance at June 30, 2017:

FY 2016-17 Bank Account and Transparency Accountability Report

Pursuant to Proviso 117.83 of the FY2017-18 Appropriations Act

Agency Name/Number: S.C. Department of Disabilities and Special Needs/J160
Account Name: Coastal Center - Acct No. xxxxxxxxx2428 (Dedicated)
Purpose of Account: Client Funds

Exemption Requested: Yes No

If exemption is requested, reason: Previously granted 3/6/12

Exemption Approved in Prior Year: Yes No

Authorized Personnel

Check Writing/Withdrawal:

Name: John Dooney
 Title: District II HRM Director

Name: Richard Nickless
 Title: Service and Supply Director

Name: Barbara Taylor
 Title: Administrative Assistant to the Facilities

Name: Rebecca Hill
 Title: Facility Administrator

Name: James Harris
 Title: Director of Maintenance

Reconciliation:

Name: Lori McCurley
 Title: Director of Finance - Coastal

Name: Edward Tustin
 Title: Fiscal Analyst III - Central Office

Financial Information

Beginning Balance at July 1, 2016:

Detailed Transactions During FY 2016 -2017:

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

DATE	Amount	Source
07/01/16 - 06/30/17	-	Summary of Deposits

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

DATE	Amount	Payee	Description of Goods/Services Purchased
07/01/16 - 06/30/17	-		Summary of Expenditures

Ending Balance at June 30, 2017:

FY 2016-17 Bank Account and Transparency Accountability Report

Pursuant to Proviso 117.83 of the FY2017-18 Appropriations Act

Agency Name/Number: S.C. Department of Disabilities and Special Needs/J160
Account Name: Midland Center - Acct No. xxxx8889 (Operating)
Purpose of Account: Client Funds

Exemption Requested: Yes No

If exemption is requested, reason: Previously granted 3/6/12

Exemption Approved in Prior Year: Yes No

Authorized Personnel

Check Writing/Withdrawal:

Name: Nancy Hall
 Title: Facility Administrator

Name: Kim Layton
 Title: Director of Finance - Midlands

Name: Paul Justus
 Title: Procurement/Claims Officer

Reconciliation:

Name: Kim Layton
 Title: Director of Finance - Midlands

Name: Edward Tustin
 Title: Fiscal Analyst III - Central Office

Financial Information

Beginning Balance at July 1, 2016:

Detailed Transactions During FY 2016 -2017:

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

DATE	Amount	Source
07/01/16 - 06/30/17	1,990,261.05	Summary of Deposits

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

DATE	Amount	Payee	Description of Goods/Services Purchased
07/01/16 - 06/30/17	2,042,728.83		Summary of Expenditures

Ending Balance at June 30, 2017:

FY 2016-17 Bank Account and Transparency Accountability Report

Pursuant to Proviso 117.83 of the FY2017-18 Appropriations Act

Agency Name/Number: S.C. Department of Disabilities and Special Needs/J160
Account Name: Midlands Center- Acct No. xxxx4539 (Direct Deposit)
Purpose of Account: Client Funds

Exemption Requested: Yes No

If exemption is requested, reason: Previously granted 3/6/12

Exemption Approved in Prior Year: Yes No

Authorized Personnel

Check Writing/Withdrawal:

Name: Nancy Hall
 Title: Facility Administrator

Name: Kim Layton
 Title: Director of Finance - Midlands

Name: Paul Justus
 Title: Procurement/Claims Officer

Reconciliation:

Name: Kim Layton
 Title: Director of Finance - Midlands

Name: Edward Tustin
 Title: Fiscal Analyst III - Central Office

Financial Information

Beginning Balance at July 1, 2016:

Detailed Transactions During FY 2016 -2017:

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

DATE	Amount	Source
07/01/16 - 06/30/17	1,755,695.03	Summary of Deposits

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

DATE	Amount	Payee	Description of Goods/Services Purchased
07/01/16 - 06/30/17	1,751,056.22		Summary of Expenditures

Ending Balance at June 30, 2017:

FY 2016-17 Bank Account and Transparency Accountability Report

Pursuant to Proviso 117.83 of the FY2017-18 Appropriations Act

Agency Name/Number: S.C. Department of Disabilities and Special Needs/J160
Account Name: Midland Center - Acct No. xxxx9401 (Dedicated)
Purpose of Account: Client Funds

Exemption Requested: Yes No

If exemption is requested, reason:
 Previously granted 3/6/12

Exemption Approved in Prior Year: Yes No

Authorized Personnel

Check Writing/Withdrawal:

Name: Nancy Hall
 Title: Facility Administrator

Name: Kim Layton
 Title: Director of Finance - Midlands

Name: Paul Justus
 Title: Procurement/Claims Officer

Reconciliation:

Name: Kim Layton
 Title: Director of Finance - Midlands

Name: Edward Tustin
 Title: Fiscal Analyst III - Central Office

Financial Information

Beginning Balance at July 1, 2016:

Detailed Transactions During FY 2016 -2017:

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

DATE	Amount	Source
07/01/16 - 06/30/17	-	Summary of Deposits

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

DATE	Amount	Payee	Description of Goods/Services Purchased
07/01/16 - 06/30/17	-		Summary of Expenditures

Ending Balance at June 30, 2017:

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Pursuant to Proviso 117.83 of the FY2017-18 Appropriations Act

Agency Name/Number: S.C. Department of Disabilities and Special Needs/J160
Account Name: Pee Dee Center- Acct No. xxxxxxxxx5306 (Operating)
Purpose of Account: Client Funds

Exemption Requested: Yes No

If exemption is requested, reason: Previously granted 3/6/12

Exemption Approved in Prior Year: Yes No

Authorized Personnel

Check Writing/Withdrawal:

Name: Deborah Reddick
 Title: Director of Finance

Name: Jack Kolesar
 Title: Co-Administrator/Program Services/Supports

Reconciliation:

Name: Joe Freeman
 Title: Claims and Collections - Pee Dee

Name: Cassandra Jackson
 Title: Claims and Collections - Pee Dee

Name: Edward Tustin
 Title: Fiscal Analyst III - Central Office

Financial Information

Beginning Balance at July 1, 2016:

Detailed Transactions During FY 2016 -2017:

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

DATE	Amount	Source
07/01/16 - 06/30/17	1,816,349.68	Summary of Deposits

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

DATE	Amount	Payee	Description of Goods/Services Purchased
07/01/16 - 06/30/17	1,813,256.44		Summary of Expenditures

Ending Balance at June 30, 2017:

FY 2016-17 Bank Account and Transparency Accountability Report

Pursuant to Proviso 117.83 of the FY2017-18 Appropriations Act

Agency Name/Number: S.C. Department of Disabilities and Special Needs/J160
Account Name: Pee Dee Center - Acct No. xxxxxxxxx9480 (Direct Deposit)
Purpose of Account: Client Funds

Exemption Requested: Yes No

If exemption is requested, reason: Previously granted 3/6/12

Exemption Approved in Prior Year: Yes No

Authorized Personnel

Check Writing/Withdrawal:

Name: Deborah Reddick
 Title: Director of Finance

Name: Jack Kolesar
 Title: Co-Administrator/Program Services/Supports

Reconciliation:

Name: Joe Freeman
 Title: Claims and Collections - Pee Dee

Name: Cassandra Jackson
 Title: Claims and Collections - Pee Dee

Name: Edward Tustin
 Title: Fiscal Analyst III - Central Office

Financial Information

Beginning Balance at July 1, 2016:

Detailed Transactions During FY 2016 -2017:

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

DATE	Amount	Source
07/01/16 - 06/30/17	1,774,467.89	Summary of Deposits

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

DATE	Amount	Payee	Description of Goods/Services Purchased
07/01/16 - 06/30/17	1,763,815.31		Summary of Expenditures

Ending Balance at June 30, 2017:

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Pursuant to Proviso 117.83 of the FY2017-18 Appropriations Act

Agency Name/Number: S.C. Department of Disabilities and Special Needs/J160
Account Name: Pee Dee Center - Acct No. xxxxxxxxx1564 (Dedicated)
Purpose of Account: Client Funds

Exemption Requested: Yes No

If exemption is requested, reason: Previously granted 3/6/12

Exemption Approved in Prior Year: Yes No

Authorized Personnel

Check Writing/Withdrawal:

Name: Deborah Reddick
 Title: Director of Finance

Name: Jack Kolesar
 Title: Co-Administrator/Program Services/Supports

Reconciliation:

Name: Joe Freeman
 Title: Claims and Collections - Pee Dee

Name: Casandra Jackson
 Title: Fiscal Analyst III - Central Office

Name: Edward Tustin
 Title: Fiscal Analyst III - Central Office

Financial Information

Beginning Balance at July 1, 2016:

Detailed Transactions During FY 2016 -2017:

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

DATE	Amount	Source
07/01/16 - 06/30/17	-	Summary of Deposits

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

DATE	Amount	Payee	Description of Goods/Services Purchased
07/01/16 - 06/30/17	-		Summary of Expenditures

Ending Balance at June 30, 2017:

FY 2016-17 Bank Account and Transparency Accountability Report

Pursuant to Proviso 117.83 of the FY2017-18 Appropriations Act

Agency Name/Number: S.C. Department of Disabilities and Special Needs/J160
Account Name: Whitten Center - Acct No. xxxxxxxxx2172 (Operating)
Purpose of Account: Client Funds

Exemption Requested: Yes No

If exemption is requested, reason: Previously granted 3/6/12

Exemption Approved in Prior Year: Yes No

Authorized Personnel

Check Writing/Withdrawal:

Name: J. Alan Longshore
 Title: Claims and Claims

Name: Tracy A Long
 Title: Fiscal Analyst

Name: Wes Leonard
 Title: Facility Administrator

Reconciliation:

Name: Deborah De Troia
 Title: Director of Finance - Whitten

Name: Edward Tustin
 Title: Fiscal Analyst III - Central Office

Financial Information

Beginning Balance at July 1, 2016:

Detailed Transactions During FY 2016 -2017:

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

DATE	Amount	Source
07/01/16 - 06/30/17	3,242,324.17	Summary of Deposits

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

DATE	Amount	Payee	Description of Goods/Services Purchased
07/01/16 - 06/30/17	3,236,554.95		Summary of Expenditures

Ending Balance at June 30, 2017:

FY 2016-17 Bank Account and Transparency Accountability Report

Pursuant to Proviso 117.83 of the FY2017-18 Appropriations Act

Agency Name/Number: S.C. Department of Disabilities and Special Needs/J160
Account Name: Whitten Center - Acct No. xxxxxxxxx2169 (Direct Deposit)
Purpose of Account: Client Funds

Exemption Requested: Yes No

If exemption is requested, reason: Previously granted 3/6/12

Exemption Approved in Prior Year: Yes No

Authorized Personnel

Check Writing/Withdrawal:

Name: J. Alan Longshore
 Title: Claims and Claims

Name: Tracy A Long
 Title: Fiscal Analyst

Name: Wes Leonard
 Title: Facility Administrator

Reconciliation:

Name: Deborah De Troia
 Title: Director of Finance - Whitten

Name: Edward Tustin
 Title: Fiscal Analyst III - Central Office

Financial Information

Beginning Balance at July 1, 2016:

Detailed Transactions During FY 2016 -2017:

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

DATE	Amount	Source
07/01/16 - 06/30/17	3,192,757.18	Summary of Deposits

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

DATE	Amount	Payee	Description of Goods/Services Purchased
07/01/16 - 06/30/17	3,189,393.83		Summary of Expenditures

Ending Balance at June 30, 2017:

FY 2016-17 Bank Account and Transparency Accountability Report

Pursuant to Proviso 117.83 of the FY2017-18 Appropriations Act

Agency Name/Number: S.C. Department of Disabilities and Special Needs/J160
Account Name: Whitten Center - Acct No. xxxxxxxxxx2185 (Dedicated)
Purpose of Account: Client Funds

Exemption Requested: Yes No

If exemption is requested, reason:
 Previously granted 3/6/12

Exemption Approved in Prior Year: Yes No

Authorized Personnel

Check Writing/Withdrawal:

Name: J. Alan Longshore
 Title: Claims and Claims

Name: Tracy A Long
 Title: Fiscal Analyst

Name: Wes Leonard
 Title: Facility Administrator

Reconciliation:

Name: Deborah De Troia
 Title: Director of Finance - Whitten

Name: Edward Tustin
 Title: Fiscal Analyst III - Central Office

Financial Information

Beginning Balance at July 1, 2016:

Detailed Transactions During FY 2016 -2017:

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

DATE	Amount	Source
07/01/16 - 06/30/17	-	Summary of Deposits

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

DATE	Amount	Payee	Description of Goods/Services Purchased
07/01/16 - 06/30/17	-		Summary of Expenditures

Ending Balance at June 30, 2017:

FY 2016-17 Bank Account and Transparency Accountability Report

Pursuant to Proviso 117.83 of the FY2017-18 Appropriations Act

Agency Name/Number: S.C. Department of Disabilities and Special Needs/J160
Account Name: Return Check - Acct No. xxxxxxxxx9231
Purpose of Account: Return Checks

Exemption Requested: Yes No

If exemption is requested, reason:
 Previously granted 3/6/12

Exemption Approved in Prior Year: Yes No

Authorized Personnel

Check Writing/Withdrawal:

Name: N/A
 Title:

Name:
 Title:

Reconciliation:

Name: Ed Tustin
 Title: Fiscal Analyst III

Name: Geneva Thomas
 Title: Accounts Receivable

Name: Deloris Hill
 Title: Accounts Payable

Financial Information

Beginning Balance at July 1, 2016:

Detailed Transactions During FY 2016 -2017:

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

DATE	Amount	Source
7/1/2016 - 6/30/2017	320.00	Summary of Deposits

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

DATE	Amount	Payee	Description of Goods/Services Purchased
7/1/2016 - 6/30/2017	320.00		Cover Bad Checks

Ending Balance at June 30, 2017: