FY 2017-18 Bank Account and Transparency Accountability Report
Pursuant to Proviso 117.83 of the FY2018-19 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 [x] No
If exemption is requested, reason:
Previously granted 3/6/12

Exemption Approved in Prior Year: [ ] Yes [x] 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, 2017: 42,915.43

Detailed Transactions During FY 2017-2018:

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

<table>
<thead>
<tr>
<th>Date</th>
<th>Amount</th>
<th>Source</th>
</tr>
</thead>
<tbody>
<tr>
<td>07/01/17 - 06/30/18</td>
<td>1,725,668.35</td>
<td>Summary of Deposits</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Date</th>
<th>Amount</th>
<th>Payee</th>
<th>Description of Goods/Services Purchased</th>
</tr>
</thead>
<tbody>
<tr>
<td>07/01/17 - 06/30/18</td>
<td>1,672,881.81</td>
<td></td>
<td>Summary of Expenditures</td>
</tr>
</tbody>
</table>

Ending Balance at June 30, 2018: 95,701.97
Account Name: Coastal Center - Acct No. xxxxxxxx9493 (Direct Deposit)
Purpose of Account: Client Funds

Exemption Requested: Yes [X] No
If exemption is requested, reason:
Previously granted 3/6/12

Exemption Approved in Prior Year: Yes [X] 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, 2017: 4,129.06

Detailed Transactions During FY 2017-2018:
Deposits (Please list each deposit separately. Add lines as needed.)

<table>
<thead>
<tr>
<th>Date</th>
<th>Amount</th>
<th>Source</th>
</tr>
</thead>
<tbody>
<tr>
<td>07/01/17 - 06/30/18</td>
<td>1,708,577.87</td>
<td>Summary of Deposits</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Date</th>
<th>Amount</th>
<th>Payee</th>
<th>Description of Goods/Services Purchased</th>
</tr>
</thead>
<tbody>
<tr>
<td>07/01/17 - 06/30/18</td>
<td>1,690,187.21</td>
<td></td>
<td>Summary of Expenditures</td>
</tr>
</tbody>
</table>

Ending Balance at June 30, 2018: 22,519.72
FY 2017-18 Bank Account and Transparency Accountability Report
Pursuant to Proviso 117.83 of the FY2018-19 Appropriations Act

Agency Name/Number: S.C. Department of Disabilities and Special Needs/J160
Account Name: Coastal Center - Acct No. xxxxxxxx2428 (Dedicated)
Purpose of Account: Client Funds

Exemption Requested: Yes [X] No
If exemption is requested, reason: Previously granted 3/6/12

Exemption Approved in Prior Year: Yes [X] 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, 2017: -

Detailed Transactions During FY 2017-2018:

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

<table>
<thead>
<tr>
<th>Date</th>
<th>Amount</th>
<th>Source</th>
</tr>
</thead>
<tbody>
<tr>
<td>07/01/17 - 06/30/18</td>
<td>-</td>
<td>Summary of Deposits</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Date</th>
<th>Amount</th>
<th>Payee</th>
<th>Description of Goods/Services Purchased</th>
</tr>
</thead>
<tbody>
<tr>
<td>07/01/17 - 06/30/18</td>
<td>-</td>
<td></td>
<td>Summary of Expenditures</td>
</tr>
</tbody>
</table>

Ending Balance at June 30, 2018: -
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 [X] No
If exemption is requested, reason:
 Previously granted 3/6/12

Exemption Approved in Prior Year: Yes [X] No

Authorized Personnel

Check Writing/Withdrawal:
Name: Nancy Hall/ Angela Wright
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, 2017: 946.80

Detailed Transactions During FY 2017-2018:

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

<table>
<thead>
<tr>
<th>Date</th>
<th>Amount</th>
<th>Source</th>
</tr>
</thead>
<tbody>
<tr>
<td>07/01/17 - 06/30/18</td>
<td>2,077,953.01</td>
<td>Summary of Deposits</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Date</th>
<th>Amount</th>
<th>Payee</th>
<th>Description of Goods/Services Purchased</th>
</tr>
</thead>
<tbody>
<tr>
<td>07/01/17 - 06/30/18</td>
<td>2,012,523.10</td>
<td></td>
<td>Summary of Expenditures</td>
</tr>
</tbody>
</table>

Ending Balance at June 30, 2018: 66,376.71
FY 2017-18 Bank Account and Transparency Accountability Report
Pursuant to Proviso 117.83 of the FY2018-19 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 X No
If exemption is requested, reason: Previously granted 3/6/12

Exemption Approved in Prior Year: Yes X No

Authorized Personnel
Check Writing/Withdrawal:
Name: Nancy Hall/ Angela Wright
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, 2017: 4,884.13

Detailed Transactions During FY 2017-2018:

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

<table>
<thead>
<tr>
<th>Date</th>
<th>Amount</th>
<th>Source</th>
</tr>
</thead>
<tbody>
<tr>
<td>07/01/17 - 06/30/18</td>
<td>1,743,857.59</td>
<td>Summary of Deposits</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Date</th>
<th>Amount</th>
<th>Payee</th>
<th>Description of Goods/Services Purchased</th>
</tr>
</thead>
<tbody>
<tr>
<td>07/01/17 - 06/30/18</td>
<td>1,741,599.48</td>
<td></td>
<td>Summary of Expenditures</td>
</tr>
</tbody>
</table>

Ending Balance at June 30, 2018: 7,142.24
**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 [X] No  
**If exemption is requested, reason:** Previously granted 3/6/12

**Exemption Approved in Prior Year:** Yes [X] No

**Authorized Personnel**  
**Check Writing/Withdrawal:**
- **Name:** Nancy Hall/ Angela Wright  
- **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, 2017:** -

**Detailed Transactions During FY 2017-2018:**

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

<table>
<thead>
<tr>
<th>Date</th>
<th>Amount</th>
<th>Source</th>
</tr>
</thead>
<tbody>
<tr>
<td>07/01/17 - 06/30/18</td>
<td>-</td>
<td>Summary of Deposits</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Date</th>
<th>Amount</th>
<th>Payee</th>
<th>Description of Goods/Services Purchased</th>
</tr>
</thead>
<tbody>
<tr>
<td>07/01/17 - 06/30/18</td>
<td>-</td>
<td></td>
<td>Summary of Expenditures</td>
</tr>
</tbody>
</table>

**Ending Balance at June 30, 2018:** -
Agency Name/Number: S.C. Department of Disabilities and Special Needs/J160  
Account Name: Pee Dee Center- Acct No. xxxxxxxxxx5306 (Operating)  
Purpose of Account: Client Funds

Exemption Requested: Yes [X] No  
If exemption is requested, reason: Previously granted 3/6/12  
Exemption Approved in Prior Year: Yes [X] No

Authorized Personnel  
Check Writing/Withdrawal:  
Name: Deborah Reddick  
Title: Director of Finance

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

Reconciliation:  
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, 2017: 150,742.39

Detailed Transactions During FY 2017-2018:  
Deposits (Please list each deposit separately. Add lines as needed.)

<table>
<thead>
<tr>
<th>Date</th>
<th>Amount</th>
<th>Source</th>
</tr>
</thead>
<tbody>
<tr>
<td>07/01/17 - 06/30/18</td>
<td>1,787,913.22</td>
<td>Summary of Deposits</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Date</th>
<th>Amount</th>
<th>Payee</th>
<th>Description of Goods/Services Purchased</th>
</tr>
</thead>
<tbody>
<tr>
<td>07/01/17 - 06/30/18</td>
<td>1,758,648.88</td>
<td></td>
<td>Summary of Expenditures</td>
</tr>
</tbody>
</table>

Ending Balance at June 30, 2018: 180,006.73
Agency Name/Number: S.C. Department of Disabilities and Special Needs/J160
Account Name: Pee Dee Center - Acct No. xxxxxxxx9480 (Direct Deposit)
Purpose of Account: Client Funds

Exemption Requested: Yes X No
If exemption is requested, reason: Previously granted 3/6/12

Exemption Approved in Prior Year: Yes X No

Authorized Personnel
Check Writing/Withdrawal:
Name: Deborah Reddick
Title: Director of Finance

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

Reconciliation:
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, 2017: 4,376.86

Detailed Transactions During FY 2017-2018:
Deposits (Please list each deposit separately. Add lines as needed.)

<table>
<thead>
<tr>
<th>Date</th>
<th>Amount</th>
<th>Source</th>
</tr>
</thead>
<tbody>
<tr>
<td>07/01/17 - 06/30/18</td>
<td>1,735,942.15</td>
<td>Summary of Deposits</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Date</th>
<th>Amount</th>
<th>Payee</th>
<th>Description of Goods/Services Purchased</th>
</tr>
</thead>
<tbody>
<tr>
<td>07/01/17 - 06/30/18</td>
<td>1,740,319.01</td>
<td></td>
<td>Summary of Expenditures</td>
</tr>
</tbody>
</table>

Ending Balance at June 30, 2018: -
Agency Name/Number: S.C. Department of Disabilities and Special Needs/J160
Account Name: Pee Dee Center - Acct No. xxxxxxxxxxx1564 (Dedicated)
Purpose of Account: Client Funds

Exemption Requested: Yes [X] No
If exemption is requested, reason: Previously granted 3/6/12

Exemption Approved in Prior Year: Yes [X] No

Authorized Personnel
Check Writing/Withdrawal:
Name: Deborah Reddick
Title: Director of Finance

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

Reconciliation:
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, 2017: -

Detailed Transactions During FY 2017-2018:
Deposits (Please list each deposit separately. Add lines as needed.)

<table>
<thead>
<tr>
<th>Date</th>
<th>Amount</th>
<th>Source</th>
</tr>
</thead>
<tbody>
<tr>
<td>07/01/17 - 06/30/18</td>
<td>-</td>
<td>Summary of Deposits</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Date</th>
<th>Amount</th>
<th>Payee</th>
<th>Description of Goods/Services Purchased</th>
</tr>
</thead>
<tbody>
<tr>
<td>07/01/17 - 06/30/18</td>
<td>-</td>
<td></td>
<td>Summary of Expenditures</td>
</tr>
</tbody>
</table>

Ending Balance at June 30, 2018: -
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
If exemption is requested, reason: Previously granted 3/6/12
Exemption Approved in Prior Year: Yes

Authorized Personnel
Check Writing/Withdrawal:
Name: J. Alan Longshore 
Title: Claims and Claims

Name: Tracy A Long
Title: Fiscal Analyst

Name: Wes Leonard / Randy Davis
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, 2017: 76,424.46

Detailed Transactions During FY 2017-2018:
Deposits (Please list each deposit separately. Add lines as needed.)

<table>
<thead>
<tr>
<th>Date</th>
<th>Amount</th>
<th>Source</th>
</tr>
</thead>
<tbody>
<tr>
<td>07/01/17 - 06/30/18</td>
<td>3,248,408.89</td>
<td>Summary of Deposits</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Date</th>
<th>Amount</th>
<th>Payee</th>
<th>Description of Goods/Services Purchased</th>
</tr>
</thead>
<tbody>
<tr>
<td>07/01/17 - 06/30/18</td>
<td>3,267,139.54</td>
<td></td>
<td>Summary of Expenditures</td>
</tr>
</tbody>
</table>

Ending Balance at June 30, 2018: 57,693.81
FY 2017-18 Bank Account and Transparency Accountability Report
Pursuant to Proviso 117.83 of the FY2018-19 Appropriations Act

<table>
<thead>
<tr>
<th>Agency Name/Number:</th>
<th>S.C. Department of Disabilities and Special Needs/J160</th>
</tr>
</thead>
<tbody>
<tr>
<td>Account Name:</td>
<td>Whitten Center - Acct No. xxxxxxxxxxx2169 (Direct Deposit)</td>
</tr>
<tr>
<td>Purpose of Account:</td>
<td>Client Funds</td>
</tr>
</tbody>
</table>

Exemption Requested: Yes [X] No
If exemption is requested, reason: Previously granted 3/6/12

Exemption Approved in Prior Year: Yes [X] No

Authorized Personnel

Check Writing/Withdrawal:
Name: J. Alan Longshore
Title: Claims and Claims

Name: Tracy A Long
Title: Fiscal Analyst

Name: Wes Leonard / Randy Davis
Title: Facility Administrator

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

76,424.46

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

Financial Information

Beginning Balance at July 1, 2017: 3,602.52

Detailed Transactions During FY 2017-2018:

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

<table>
<thead>
<tr>
<th>Date</th>
<th>Amount</th>
<th>Source</th>
</tr>
</thead>
<tbody>
<tr>
<td>07/01/17 - 06/30/18</td>
<td>3,216,723.94</td>
<td>Summary of Deposits</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Date</th>
<th>Amount</th>
<th>Payee</th>
<th>Description of Goods/Services Purchased</th>
</tr>
</thead>
<tbody>
<tr>
<td>07/01/17 - 06/30/18</td>
<td>3,210,664.18</td>
<td></td>
<td>Summary of Expenditures</td>
</tr>
</tbody>
</table>

Ending Balance at June 30, 2018: 9,662.28
FY 2017-18 Bank Account and Transparency Accountability Report
Pursuant to Proviso 117.83 of the FY2018-19 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  X  No
If exemption is requested, reason:
Previously granted 3/6/12

Exemption Approved in Prior Year: Yes  X  No

Authorized Personnel
Check Writing/Withdrawal:
Name: J. Alan Longshore
Title: Claims and Claims

Name: Tracy A Long
Title: Fiscal Analyst

Name: Wes Leonard / Randy Davis
Title: Facility Administrator

Reconciliation:
Name: Deborah De Troia
Title: Director of Finance - Whitten
76,424.46

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

Financial Information

Beginning Balance at July 1, 2017: -

Detailed Transactions During FY 2017-2018:
Deposits (Please list each deposit separately. Add lines as needed.)

<table>
<thead>
<tr>
<th>Date</th>
<th>Amount</th>
<th>Source</th>
</tr>
</thead>
<tbody>
<tr>
<td>07/01/17 - 06/30/18</td>
<td>-</td>
<td>Summary of Deposits</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Date</th>
<th>Amount</th>
<th>Payee</th>
<th>Description of Goods/Services</th>
</tr>
</thead>
<tbody>
<tr>
<td>07/01/17 - 06/30/18</td>
<td>-</td>
<td></td>
<td>Summary of Expenditures</td>
</tr>
</tbody>
</table>

Ending Balance at June 30, 2018: -
FY 2017-18 Bank Account and Transparency Accountability Report
Pursuant to Proviso 117.83 of the FY2018-19 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 - no checks
Title

Reconciliation:
Name: Ed Tustin
Title: Fiscal Analyst III
Name: Deloris Hill
Title: Accounts Payable

Financial Information

Beginning Balance at July 1, 2017: $1,000.00

Detailed Transactions During FY 2017-2018:
Deposits (Please list each deposit separately. Add lines as needed.)

<table>
<thead>
<tr>
<th>Date</th>
<th>Amount</th>
<th>Source</th>
</tr>
</thead>
<tbody>
<tr>
<td>07/01/17 - 06/30/18</td>
<td>75.00</td>
<td>Summary of Deposits</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Date</th>
<th>Amount</th>
<th>Payee</th>
<th>Description of Goods/Services Purchased</th>
</tr>
</thead>
<tbody>
<tr>
<td>07/01/17 - 06/30/18</td>
<td>75.00</td>
<td></td>
<td>Cover Bad Checks</td>
</tr>
</tbody>
</table>

Ending Balance at June 30, 2018: $1,000.00