FY 2018-19 Bank Account and Transparency Accountability Report
Pursuant to Proviso 117.82 of the FY2019-20 Appropriations Act

Agency Name/Number: S.C. Department of Disabilities and Special Needs/J160
Account Name: Coastal Center - Acct No. xxxxxxxxxx8494 (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: David Gildmintz
Title: Facility Administrator

Name: Rebecca Hill
Title: Administrator

Reconciliation:
Name: Lori McCurley
Title: Director of Finance

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

Financial Information
Beginning Balance at July 1, 2018: 95,701.97

Detailed Transactions During FY 2018-2019:

<table>
<thead>
<tr>
<th>Date</th>
<th>Amount</th>
<th>Source</th>
</tr>
</thead>
<tbody>
<tr>
<td>07/01/18 - 06/30/19</td>
<td>1,797,062.54</td>
<td>Summary of Deposits</td>
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Withdrawals:

<table>
<thead>
<tr>
<th>Date</th>
<th>Amount</th>
<th>Payee</th>
<th>Description of Goods/Services Purchased</th>
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<tbody>
<tr>
<td>07/01/18 - 06/30/19</td>
<td>1,746,031.42</td>
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</table>

Ending Balance at June 30, 2019: 146,733.09
FY 2018-19 Bank Account and Transparency Accountability Report
Pursuant to Proviso 117.82 of the FY2019-20 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 [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: David Gildmintz
Title: Facility Administrator
Name: Rebecca Hill
Title: Administrator

Reconciliation:
Name: Lori McCurley
Title: Director of Finance
Name: Edward Tustin
Title: Fiscal Analyst III - Central Office

Financial Information
Beginning Balance at July 1, 2018: 22,519.72

Detailed Transactions During FY 2018-2019:
Deposits:
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Withdrawals:
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<td>1,740,523.42</td>
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Ending Balance at June 30, 2019: 12,394.07
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<th>Date</th>
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<th>Source</th>
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</thead>
<tbody>
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<td>Summary of Deposits</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Date</th>
<th>Amount</th>
<th>Payee</th>
<th>Description of Goods/Services Purchased</th>
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<tbody>
<tr>
<td>07/01/18 - 06/30/19</td>
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<td></td>
<td>Summary of Expenditures</td>
</tr>
</tbody>
</table>
FY 2018-19 Bank Account and Transparency Accountability Report
Pursuant to Proviso 117.82 of the FY2019-20 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 [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: Angela Wright
Title: Facility Administrator

Name: Kim Layton
Title: Director of Finance - Midlands

Name: Paul Justus
Title: Procurement/Claims Officer

Reconciliation:
Name: Kim Layton/Debbie Detroria
Title: Director of Finance - Midlands

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

Financial Information
Beginning Balance at July 1, 2018: 66,376.71

Detailed Transactions During FY 2018-2019:
Deposits:

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<tr>
<th>Date</th>
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<tr>
<td>07/01/18 - 06/30/19</td>
<td>2,363,598.75</td>
<td>Summary of Deposits</td>
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Withdrawals:

<table>
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<th>Amount</th>
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<td>07/01/18 - 06/30/19</td>
<td>2,207,011.42</td>
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</table>

Ending Balance at June 30, 2019: 222,964.04
FY 2018-19 Bank Account and Transparency Accountability Report
Pursuant to Proviso 117.82 of the FY2019-20 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: Angela Wright  
Title: Facility Administrator

Name: Kim Layton  
Title: Director of Finance - Midlands

Name: Paul Justus  
Title: Procurement/Claims Officer

Reconciliation:
Name: Kim Layton/Debbie Detroria  
Title: Director of Finance - Midlands

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

Financial Information

Beginning Balance at July 1, 2018: 7,142.24

Detailed Transactions During FY 2018-2019:

Deposits:

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<th>Date</th>
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Withdrawals:

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<td>07/01/18 - 06/30/19</td>
<td>1,990,246.70</td>
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</table>

Ending Balance at June 30, 2019: 475.29
**FY 2018-19 Bank Account and Transparency Accountability Report**  
Pursuant to Proviso 117.82 of the FY2019-20 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 [x]  
If exemption is requested, reason:  
Previously granted 3/6/12

Exemption Approved in Prior Year: Yes [x]  

**Authorized Personnel**  
Check Writing/Withdrawal:  
Name: Angela Wright  
Title: Facility Administrator

Name: Kim Layton  
Title: Director of Finance - Midlands

Name: Paul Justus  
Title: Procurement/Claims Officer

Reconciliation:  
Name: Kim Layton/Debbie Detroria  
Title: Director of Finance - Midlands

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

**Financial Information**

Beginning Balance at July 1, 2018: 

Detailed Transactions During FY 2018-2019:  

**Deposits:**

<table>
<thead>
<tr>
<th>Date</th>
<th>Amount</th>
<th>Source</th>
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</thead>
<tbody>
<tr>
<td>07/01/18 - 06/30/19</td>
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<td>Summary of Deposits</td>
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</table>

**Withdrawals:**

<table>
<thead>
<tr>
<th>Date</th>
<th>Amount</th>
<th>Payee</th>
<th>Description of Goods/Services Purchased</th>
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<tbody>
<tr>
<td>07/01/18 - 06/30/19</td>
<td>-</td>
<td></td>
<td>Summary of Expenditures</td>
</tr>
</tbody>
</table>

Ending Balance at June 30, 2019: -
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 [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, 2018:  180,006.73

Detailed Transactions During FY 2018-2019:

<table>
<thead>
<tr>
<th>Date</th>
<th>Amount</th>
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<tr>
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<td>Summary of Deposits</td>
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Withdrawals: (Please list each withdrawal separately. Add lines as needed)

<table>
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<tr>
<th>Date</th>
<th>Amount</th>
<th>Payee</th>
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<tr>
<td>07/01/18 - 06/30/19</td>
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</table>

Ending Balance at June 30, 2019:  517,721.10
FY 2018-19 Bank Account and Transparency Accountability Report  
_Pursuant to Proviso 117.82 of the FY2019-20 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 [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, 2018: -

**Detailed Transactions During FY 2018-2019:**  
**Deposits:**

<table>
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<tr>
<th>Date</th>
<th>Amount</th>
<th>Source</th>
</tr>
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<tbody>
<tr>
<td>07/01/18 - 06/30/19</td>
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</table>

**Withdrawals:**

<table>
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<tr>
<th>Date</th>
<th>Amount</th>
<th>Payee</th>
<th>Description of Goods/Services Purchased</th>
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<tbody>
<tr>
<td>07/01/18 - 06/30/19</td>
<td>2,408,146.50</td>
<td></td>
<td>Summary of Expenditures</td>
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</tbody>
</table>

Ending Balance at June 30, 2019: -
FY 2018-19 Bank Account and Transparency Accountability Report
Pursuant to Proviso 117.82 of the FY2019-20 Appropriations Act

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, 2018: -

Detailed Transactions During FY 2018-2019:
Deposits:

<table>
<thead>
<tr>
<th>Date</th>
<th>Amount</th>
<th>Source</th>
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<tbody>
<tr>
<td>07/01/18 - 06/30/19</td>
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Withdrawals:

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<tr>
<th>Date</th>
<th>Amount</th>
<th>Payee</th>
<th>Description of Goods/Services Purchased</th>
</tr>
</thead>
<tbody>
<tr>
<td>07/01/18 - 06/30/19</td>
<td></td>
<td></td>
<td>Summary of Expenditures</td>
</tr>
</tbody>
</table>

Ending Balance at June 30, 2019: -
FY 2018-19 Bank Account and Transparency Accountability Report
Pursuant to Proviso 117.82 of the FY2019-20 Appropriations Act

Agency Name/Number: S.C. Department of Disabilities and Special Needs/J160
Account Name: Whitten Center - Acct No. xxxxxxxx2172 (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: 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
Deposits: 57,693.81

Detailed Transactions During FY 2018-2019:
Deposits:

<table>
<thead>
<tr>
<th>Date</th>
<th>Amount</th>
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<tbody>
<tr>
<td>07/01/18 - 06/30/19</td>
<td>3,360,654.42</td>
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Withdrawals:

<table>
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<th>Payee</th>
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</thead>
<tbody>
<tr>
<td>07/01/18 - 06/30/19</td>
<td>3,348,165.82</td>
<td></td>
<td>Summary of Expenditures</td>
</tr>
</tbody>
</table>

Ending Balance at June 30, 2019: 70,182.41
Account Name: Whitten Center - Acct No. xxxxxxxx2169 (Direct Deposit)
Purpose of Account: Client Funds

Exemption Requested: Yes [ ] No [x] 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
Title: Facility Administrator

Reconciliation:
Name: Deborah De Troia
Title: Director of Finance - Whitten
Name: Edward Tustin
Title: Fiscal Analyst III - Central Office

Financial Information
Deposits: 9,662.28

Detailed Transactions During FY 2018-2019:
Deposits:

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<tr>
<th>Date</th>
<th>Amount</th>
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<tbody>
<tr>
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Withdrawals:

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<tr>
<th>Date</th>
<th>Amount</th>
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<th>Description of Goods/Services Purchased</th>
</tr>
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<tbody>
<tr>
<td>07/01/18 - 06/30/19</td>
<td>3,315,182.68</td>
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<td>Summary of Expenditures</td>
</tr>
</tbody>
</table>

Ending Balance at June 30, 2019: 2,199.00
**FY 2018-19 Bank Account and Transparency Accountability Report**

*Pursuant to Proviso 117.82 of the FY2019-20 Appropriations Act*

**Agency Name/Number:** S.C. Department of Disabilities and Special Needs/J160  
**Account Name:** Whitten Center - Acct No. xxxxxxxxx2185 (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  
- **Title:** Facility Administrator

**Reconciliation:**
- **Name:** Deborah De Troia  
- **Title:** Director of Finance - Whitten  
- **Name:** Edward Tustin  
- **Title:** Fiscal Analyst III - Central Office

**Financial Information**

**Deposits:**

**Detailed Transactions During FY 2018-2019:**

**Deposits:**

**Date** | **Amount** | **Source**
--- | --- | ---
07/01/18 - 06/30/19 | - | Summary of Deposits

**Withdrawals:**

**Date** | **Amount** | **Payee** | **Description of Goods/Services Purchased**
--- | --- | --- | ---
07/01/18 - 06/30/19 | - | | Summary of Expenditures

**Ending Balance at June 30, 2019:**

FY 2018-19 Bank Account and Transparency Accountability Report
Pursuant to Proviso 117.82 of the FY2019-20 Appropriations Act

Agency Name/Number: S.C. Department of Disabilities and Special Needs/J160
Account Name: Return Check - Acct No. xxxxxxxxxx9231
Purpose of Account: Return Checks

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: 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, 2018: 1,000.00

Detailed Transactions During FY 2018-2019:
Deposits:

<table>
<thead>
<tr>
<th>Date</th>
<th>Amount</th>
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<tbody>
<tr>
<td>07/01/18 - 06/30/19</td>
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<td>Summary of Deposits</td>
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Withdrawals:

<table>
<thead>
<tr>
<th>Date</th>
<th>Amount</th>
<th>Payee</th>
<th>Description of Goods/Services Purchased</th>
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<tbody>
<tr>
<td>07/01/18 - 06/30/19</td>
<td>-</td>
<td></td>
<td>Summary of Expenditures</td>
</tr>
</tbody>
</table>

Ending Balance at June 30, 2019: -