## State of South Carolina Request for Contribution Distribution

This form is designed to collect the information required by South Carolina in accordance with Proviso 117.21 of the appropriations act and Executive Order 2022-19. This form must be submitted to the state agency that is providing the contribution for the designated organization. The state agency providing the contribution should use this form to collect information from the designated organization. The information must be collected from the designated organization before the funds can be disbursed.

| Contribution Information |   |   |  |  |
|--------------------------|---|---|--|--|
| Amount                   | State Agency Providing the Contribution | Purpose   |  |  |
|                          | H030 - Commission on Higher Education   | FY 2025 Higher Education Excellence Enhancement Program (HEEEP) |  |  |

| Organization Information |                        |  |  |
|--------------------------|------------------------|--|--|
| Entity Name              | Claflin University     |  |  |
| Address                  | 400 Magnolia Street    |  |  |
| City/State/Zip           | Orangeburg, SC 29115   |  |  |
| Website                  | www.claflin.edu        |  |  |
| Tax ID#                  | 57-0314374             |  |  |
| Entity Type              | Nonprofit Organization |  |  |

| Organization Contact Information |                                       |  |  |  |
|----------------------------------|---------------------------------------|--|--|--|
| Contact Name                     | Tarshua Teresa Mack                   |  |  |  |
| Position/Title                   | AVP Title III and Special Initiatives |  |  |  |
| Telephone                        | 803-535-5540                          |  |  |  |
| Email                            | tamack@claflin.edu                    |  |  |  |

| Plan/Accounting of how these funds will be spent:                           |                |   |  |  |  |  |
|---|----------------|---|--|--|--|--|
| Description   | Budget         | Explanation   |  |  |  |  |
| 1. School of Natural Sciences and Mathematics Scientific Equipment HNT MRSC | \$119,500.00   | Operation and maintenance of the MSRC Research and Teaching Facility (NMR |  |  |  |  |
| Academic Buildings Construction, Renovation and Maintenance                 | \$500,000.00   | Perform construction, maintence, and renovation for academic buildings    |  |  |  |  |
| Claflin University Innovation Center TITAN                                  | \$350,500.00   | The institute for teaching and nursing.                                   |  |  |  |  |
| 2.2.  | \$30,000.00    | Provide matching funds for (1) Americorps Vista student                   |  |  |  |  |
|   |                |   |  |  |  |  |
|   |                |   |  |  |  |  |
|   |                |   |  |  |  |  |
|   |                |   |  |  |  |  |
|   |                |   |  |  |  |  |
| Grand Total   | \$1,000,000.00 |   |  |  |  |  |

## Please explain how these funds will be used to provide a public benefit:

The FY 2025 HEEEP Funds program aims to improve educational opportunities for disadvantaged and low-income students. We propose to accomplish this by maintaining and developing academic facilities, maintaining scientific equipment, supporting the institute for teaching and nursing, and supporting our Americorps Vista program for student development.

1) Organization hereby gives assurance that no person shall, upon the grounds of race, creed, color, or national origin, be excluded from participation in, be denied the benefit of, or be

otherwise subjected to discrimination under any program or activity for which this organization is responsible.

2) Organization certifies that it will provide quarterly spending reports to the Agency Providing Contribution listed above.

3) Organization certifies that it will provide an accounting at the end of the fiscal year to the Agency Providing Contribution listed above.

4) Organization certifies that it will allow the State Auditor to audit or cause to be audited the contributed funds.

Tarshua Mack

Organization Signature

Tarshua Teresa Mack

Printed Name

Assistant Vice President for Title

**Organization Certifications** 

12/16/2024 Date

Title

**Certifications of State Agency Providing Contribution** 

1) State Agency certifies that the planned expenditure aligns with the Agency's mission and/or the purpose specified in the appropriations act.

2) State Agency certifies that the Organization has set forth a public purpose to be served through receipt of the expenditure.

3) State Agency certifies that it will make distributions directly to the organization.

4) State Agency certifies that it will provide the quarterly spending reports and accounting received from the organization to the Senate Finance Committee, House Ways and Means

Committee, and the Executive Budget Office by June 30, 2024.

5) State Agency certifies that it will publish on their website any and all reports, accountings, forms, updates, communications, or other materials required by Proviso 117.21 of the appropriations act.

6) State Agency will certify to the Office of the Governor that it has complied with the requirements of Executive Order 2022-19 by June 30, 2024.

2/13/2025

Agency Head Signature

Date

L. Jeffrey Perez

Printed Name