EXHIBIT C
SOUTH CAROLINA EMERGENCY MANAGEMENT DIVISION
OFFICE OF THE ADJUTANT GENERAL
PRE-DISASTER MITIGATION GRANT PROGRAM
PROJECT EXPENDITURES

Subrecipient: **NAME of AGENCY**

Project Application #: **PDMC-PL-04-SC-20XX-0XX**

Subrecipient's Reference No. (Voucher, Claim or Schedule No.)	Delivery Date of article or service	DOCUMENTATION List Project Documentation (payroll, material out stock, recipient owned equipment or name of vendor or contractor, etc.) and give a brief description of the article or service	Costs