

**FY 2015-16 Bank Account and Transparency Accountability Report
 FY 2016-17 Appropriation Act, Proviso 117.83**

Agency Name/Number: FORESTRY COMMISSION/P120
Account Name: FLORENCE
Purpose of Account: PETTY CASH

Exemption Requested: Yes No
If exemption is requested, reason:

Exemption Approved in Prior Year: Yes No

Authorized Personnel

Check Writing/Withdrawal:

Name: SUSAN GENSEL
 Title: ADMINISTRATIVE ASSISTANT

Name: MIKE NEY
 Title: REGIONAL FORESTER

Reconciliation:

Name: JANE LENEAVE
 Title: FISCAL ANALYST II

Name: CATHY NORDEEN
 Title: ACCOUNTING MANAGER

Financial Information

Beginning Balance at July 1, 2015:

Detailed Transactions During FY 2015 -2016:

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

DATE	Amount	Source

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

DATE	Amount	Payee	Description of Goods/Services Purchased

Ending Balance at June 30, 2016:

**FY 2015-16 Bank Account and Transparency Accountability Report
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Agency Name/Number: FORESTRY COMMISSION/P120
Account Name: SPARTANBURG
Purpose of Account: PETTY CASH

Exemption Requested: Yes No
If exemption is requested, reason:

Exemption Approved in Prior Year: Yes No

Authorized Personnel

Check Writing/Withdrawal:

Name: KAY COUNTS
Title: ADMINISTRATIVE ASSISTANT

Name: NANCY WICKER
Title: ADMINISTRATIVE ASSISTANT

Reconciliation:

Name: JANE LENEAVE
Title: FISCAL ANALYST II

Name: CATHY NORDEEN
Title: ACCOUNTING MANAGER

Financial Information

Beginning Balance at July 1, 2015:

Detailed Transactions During FY 2015 -2016:

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

DATE	Amount	Source

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

DATE	Amount	Payee	Description of Goods/Services Purchased

Ending Balance at June 30, 2016:

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Agency Name/Number: FORESTRY COMMISSION/P120
Account Name: WALTERBORO
Purpose of Account: PETTY CASH

Exemption Requested: Yes No
If exemption is requested, reason:

Exemption Approved in Prior Year: Yes No

Authorized Personnel

Check Writing/Withdrawal:

Name: VICKI IRICK
Title: ADMINISTRATIVE ASSISTANT

Name: CALVIN BAILEY
Title: REGIONAL FORESTER

Reconciliation:

Name: JANE LENEAVE
Title: FISCAL ANALYST II

Name: CATHY NORDEEN
Title: ACCOUNTING MANAGER

Financial Information

Beginning Balance at July 1, 2015:

Detailed Transactions During FY 2015 -2016:

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

DATE	Amount	Source

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

DATE	Amount	Payee	Description of Goods/Services Purchased

Ending Balance at June 30, 2016:

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Agency Name/Number: FORESTRY COMMISSION/P120
Account Name: TAYLOR NURSERY
Purpose of Account: PETTY CASH

Exemption Requested: Yes No
If exemption is requested, reason:

Exemption Approved in Prior Year: Yes No

Authorized Personnel

Check Writing/Withdrawal:

Name: MICHELE RAY
Title: ADMINISTRATIVE ASSISTANT

Name: HAMP E HOLMES III
Title: NURSERY SUPERVISOR

Reconciliation:

Name: JANE LENEAVE
Title: FISCAL ANALYST II

Name: CATHY NORDEEN
Title: ACCOUNTING MANAGER

Financial Information

Beginning Balance at July 1, 2015:

Detailed Transactions During FY 2015 -2016:

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

DATE	Amount	Source
5/26/2016	152.00	OPERATING FUNDS

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

DATE	Amount	Payee	Description of Goods/Services Purchased
6/20/2016	80.00	JEREMY GANTT	20 BUSHELS BLACK WALNUT
5/26/2016	72.00	MARGARET BARNES	18 BUSHELS BLACK WALNUT

Ending Balance at June 30, 2016: