

**Basic Information Checklist**

|                           |   |
|---------------------------|---|
| <b>Agency Responding</b>  | South Carolina Transportation Infrastructure Bank |
| <b>Date of Submission</b> | 9/15/2017   |

(1) If information on each of the following topics below is not available on the agency's website, please enter "Not available on agency website, see agency's Program Evaluation Report." If the information is available on the agency's website, please provide the link to the page on the agency's website where each can be found.

|                               |   |
|-------------------------------|---|
| <b>History</b>                | <a href="http://sctib.sc.gov/Pages/default.aspx">http://sctib.sc.gov/Pages/default.aspx</a>                           |
| <b>Governing Body</b>         | <a href="http://sctib.sc.gov/BoardMembers/Pages/default.aspx">http://sctib.sc.gov/BoardMembers/Pages/default.aspx</a> |
| <b>Internal Audit Process</b> | <a href="http://sctib.sc.gov/Pages/Reporting.aspx">http://sctib.sc.gov/Pages/Reporting.aspx</a>                       |
| <b>Contact this Agency</b>    | <a href="http://sctib.sc.gov/Pages/ContactUs.aspx">http://sctib.sc.gov/Pages/ContactUs.aspx</a>                       |

(2) Is the information the agency has on its website (or submitted in its Program Evaluation Report, if not on the agency's website) related to each of the following topics up to date as of the date this Annual RFI is submitted? (Y/N)

|                               |     |
|-------------------------------|-----|
| <b>History</b>                | Yes |
| <b>Governing Body</b>         | Yes |
| <b>Internal Audit Process</b> | Yes |
| <b>Contact this Agency</b>    | Yes |

(3) If the agency answered No to any of the items in question two, please either (1) enter "See emailed document," and submit a Word document with complete, up to date, information so the Oversight Committee can post it on the Oversight webpage; or (2) enter the date the information will be updated on the agency's website.

|                               |  |
|-------------------------------|--|
| <b>History</b>                |  |
| <b>Governing Body</b>         |  |
| <b>Internal Audit Process</b> |  |
| <b>Contact this Agency</b>    |  |

Comprehensive Strategic Plan Summary

|   |   |
|---|---|
| Agency Responding   | South Carolina Transportation Infrastructure Bank |
| Date of Submission  | 9/15/2017   |
| <b>Mission:</b> The corporate purpose of the bank is to select and assist in financing major qualified projects by providing loans and other financial assistance to government units and private entities for constructing and improving highway and transportation facilities |   |
| <b>Vision:</b> The vision of the SCTIB is to provide financial assistance for projects that provide public benefit by enhancing mobility and safety, promoting economic development, and enhance the quality of life of the citizens of South Carolina.                         |   |

| 2016-17                                    |   | 2017-18                                    |   |
|--|---|--|---|
| Total # of FTEs available / Total # filled | Total amount Appropriated and Authorized to Spend | Total # of FTEs available / Total # filled | Total amount Appropriated and Authorized to Spend |
| Available: 6<br>Filled: 2                  | \$ 400,000  | Available: 6<br>Filled: 2                  | \$ 400,000  |

|                     |
|---------------------|
| Amount of remaining |
| \$ -                |

|                     |
|---------------------|
| Amount of remaining |
| \$ -                |

| 2017-18 Comprehensive Strategic Plan Part and Description<br>(e.g., Goal 1 - Insert Goal 1; Strategy 1.1 - Insert Strategy 1.1; Objective 1.1.1 - Insert Objective 1.1.1) | Intended Public Benefit/Outcome:<br>(Ex. Outcome = incidents decrease and public perceives that the road is safer) | 2016-17                       |                    | 2017-18                                 |                       | Associated Performance Measures | Associated Organizational Unit(s) | Responsible Employee Name & Time staff member has been responsible for the goal or objective<br>(e.g. John Doe (responsible less than 3 years) or Jane Doe (responsible more than 3 years)) | Does this person have input into the budget for this goal, strategy or objective?<br>(Y/N) | Partner(s), by segment, the agency works with to achieve the objective (Federal Government; State Government; Local Government; Higher Education Institute; K-12 Education Institute; Private Business; Non-Profit Entity; Individual; or Other) |
|---|--|-------------------------------|--------------------|---|-----------------------|---------------------------------|-----------------------------------|---|--|--|
|   |  | # of FTE equivalents utilized | Total amount spent | # of FTE equivalents planned to utilize | Total amount budgeted |                                 |                                   |   |  |  |
| Goal 1: Maximize funding for major projects   |  |                               |                    |   |                       |                                 |                                   |   |  |  |
| Strategy 1.1: Review financial capacity   |  | 2                             | 203,059,644        | 6                                       | 252,985,870           | 1, 2, 3, 4, 5                   |                                   | Tami Reed, 4 years  | Y  | State Government, Local Government, Private Business   |
| Objective 1.1.1: Annually update business and financial plan to determine available capacity  |  |                               |                    |   |                       |                                 |                                   |   |  |  |
| Objective 1.1.2: Issue bonds as needed to fund approved projects  |  |                               |                    |   |                       |                                 |                                   |   |  |  |
| Objective 1.1.3: Consult with potential applicants to advise of preferred percentage and type of local match  |  |                               |                    |   |                       |                                 |                                   |   |  |  |
| Objective 1.1.4: Issue refunding bonds when significant savings will be generated   |  |                               |                    |   |                       |                                 |                                   |   |  |  |
| Spent/Transferred not toward Agency's Comprehensive Strategic Plan  |  |                               |                    |   |                       |                                 |                                   |   |  |  |
| Unrelated Purpose #1 - insert description:  |  |                               |                    |   |                       |                                 |                                   |   |  |  |
| Insert any additional unrelated purposes  |  |                               |                    |   |                       |                                 |                                   |   |  |  |

**Deliverables**

|                    |   |
|--------------------|---|
| Agency Responding  | South Carolina Transportation Infrastructure Bank |
| Date of Submission | 9/15/2017   |

Note: Delete any rows not needed; Add any additional rows needed

**How to Format Law Citations under "Applicable Laws" column:**

When adding law(s), please cite them as follows and, if there are multiple laws, separate them with a ";":

State Constitution: Article # . Title of Article . Section # . Title of Section (Example - Article IV. Executive Department. Section 12. Disability of Governor)

State Statute: ## - ## - ## . Name of Provision . (Example - 1-1-110. What officers constitute executive department.)

Federal Statute: Title # . U.S.C. Section # (Any common name for the statute )

State Regulation: Chapter # - Section # (Any common name for the regulation)

Federal Regulation: Title # C.F.R. Section # (Any common name for the regulation )

State Proviso: Proviso ## . # (Proviso Description ), 2015-16 (or whichever year is applicable) Appropriations Act Part 1B (Example - 117.9 (GP: Transfers of Appropriations), 2014-15 Appropriations Act, Part 1B.)

| Item # | Deliverable (i.e. service or product) | Applicable Laws | Does the law(s)...<br>A) Specifically REQUIRE the agency provide it (must or shall)?<br>B) Specifically ALLOW the agency to provide it (may)?<br>C) Not specifically address it? | Deliverable Component (if needed) - If deliverable is too broad to complete the remaining columns, list each product/service associated with the deliverable, and complete the remaining columns | Does the agency evaluate customer satisfaction? (Y/N) | Is the agency permitted by statute, regulation, or proviso to charge for it? (Y/N) | Does the agency know the... |  |                                     |
|--------|---------------------------------------|-----------------|--|--|---|--|-----------------------------|--|-------------------------------------|
|        |                                       |                 |  |  |   |  | cost per unit? (Y/N)        | annual # of potential customers? (Y/N) | annual # of customers served? (Y/N) |
| 1      |                                       |                 |  |  |   |  |                             |  |                                     |
| 2      |                                       |                 |  |  |   |  |                             |  |                                     |
| 3      |                                       |                 |  |  |   |  |                             |  |                                     |
| 4      |                                       |                 |  |  |   |  |                             |  |                                     |
| 5      |                                       |                 |  |  |   |  |                             |  |                                     |
| 6      |                                       |                 |  |  |   |  |                             |  |                                     |
| 7      |                                       |                 |  |  |   |  |                             |  |                                     |
| 8      |                                       |                 |  |  |   |  |                             |  |                                     |
| 9      |                                       |                 |  |  |   |  |                             |  |                                     |
| 10     |                                       |                 |  |  |   |  |                             |  |                                     |
| 11     |                                       |                 |  |  |   |  |                             |  |                                     |
| 12     |                                       |                 |  |  |   |  |                             |  |                                     |
| 13     |                                       |                 |  |  |   |  |                             |  |                                     |
| 14     |                                       |                 |  |  |   |  |                             |  |                                     |
| 15     |                                       |                 |  |  |   |  |                             |  |                                     |
| 16     |                                       |                 |  |  |   |  |                             |  |                                     |
| 17     |                                       |                 |  |  |   |  |                             |  |                                     |
| 18     |                                       |                 |  |  |   |  |                             |  |                                     |
| 19     |                                       |                 |  |  |   |  |                             |  |                                     |
| 20     |                                       |                 |  |  |   |  |                             |  |                                     |
| 21     |                                       |                 |  |  |   |  |                             |  |                                     |
| 22     |                                       |                 |  |  |   |  |                             |  |                                     |
| 23     |                                       |                 |  |  |   |  |                             |  |                                     |
| 24     |                                       |                 |  |  |   |  |                             |  |                                     |
| 25     |                                       |                 |  |  |   |  |                             |  |                                     |
| 26     |                                       |                 |  |  |   |  |                             |  |                                     |
| 27     |                                       |                 |  |  |   |  |                             |  |                                     |
| 28     |                                       |                 |  |  |   |  |                             |  |                                     |
| 29     |                                       |                 |  |  |   |  |                             |  |                                     |
| 30     |                                       |                 |  |  |   |  |                             |  |                                     |

**Organizational Units**

|                           |   |
|---------------------------|---|
| <b>Agency Responding</b>  | South Carolina Transportation Infrastructure Bank |
| <b>Date of Submission</b> | 9/15/2017   |

|  |  |
|--|--|
| <b>Did the agency have an exit interview and/or survey, evaluation, etc. when employees left the agency in 2014-15; 2015-16; or 2016-17? (Y/N)</b> | 2014-15: N/A<br>2015-16: N/A<br>2016-17: N/A |
|--|--|

Note: Delete any rows not needed; Add any additional rows needed

| Organizational Unit | Purpose of Unit | Turnover Rate in the organizational unit in 2014-15; 2015-16; and 2016-17? | Did the agency evaluate and track employee satisfaction in the organizational unit in 2014-15; 2015-16; and 2016-17? (Y/N) | Did the agency allow for anonymous feedback from employees in the organizational unit in 2014-15; 2015-16; and 2016-17? (Y/N) | Did any of the jobs in the organizational unit require a certification (e.g., teaching, medical, accounting, etc.) in 2014-15; 2015-16; and 2016-17? (Y/N) | If yes, for any years in the previous column, did the agency pay for, or provide in-house, classes/instruction/etc. needed to maintain <b>all, some, or none</b> of the required certifications? |
|---------------------|-----------------|--|--|---|--|--|
|                     |                 | 2014-15:<br>2015-16:<br>2016-17:   | 2014-15:<br>2015-16:<br>2016-17:   | 2014-15:<br>2015-16:<br>2016-17:  | 2014-15:<br>2015-16:<br>2016-17:   | 2014-15:<br>2015-16:<br>2016-17:   |
|                     |                 | 2014-15:<br>2015-16:<br>2016-17:   | 2014-15:<br>2015-16:<br>2016-17:   | 2014-15:<br>2015-16:<br>2016-17:  | 2014-15:<br>2015-16:<br>2016-17:   | 2014-15:<br>2015-16:<br>2016-17:   |
|                     |                 | 2014-15:<br>2015-16:<br>2016-17:   | 2014-15:<br>2015-16:<br>2016-17:   | 2014-15:<br>2015-16:<br>2016-17:  | 2014-15:<br>2015-16:<br>2016-17:   | 2014-15:<br>2015-16:<br>2016-17:   |
|                     |                 | 2014-15:<br>2015-16:<br>2016-17:   | 2014-15:<br>2015-16:<br>2016-17:   | 2014-15:<br>2015-16:<br>2016-17:  | 2014-15:<br>2015-16:<br>2016-17:   | 2014-15:<br>2015-16:<br>2016-17:   |
|                     |                 | 2014-15:<br>2015-16:<br>2016-17:   | 2014-15:<br>2015-16:<br>2016-17:   | 2014-15:<br>2015-16:<br>2016-17:  | 2014-15:<br>2015-16:<br>2016-17:   | 2014-15:<br>2015-16:<br>2016-17:   |
|                     |                 | 2014-15:<br>2015-16:<br>2016-17:   | 2014-15:<br>2015-16:<br>2016-17:   | 2014-15:<br>2015-16:<br>2016-17:  | 2014-15:<br>2015-16:<br>2016-17:   | 2014-15:<br>2015-16:<br>2016-17:   |
|                     |                 | 2014-15:<br>2015-16:<br>2016-17:   | 2014-15:<br>2015-16:<br>2016-17:   | 2014-15:<br>2015-16:<br>2016-17:  | 2014-15:<br>2015-16:<br>2016-17:   | 2014-15:<br>2015-16:<br>2016-17:   |
|                     |                 | 2014-15:<br>2015-16:<br>2016-17:   | 2014-15:<br>2015-16:<br>2016-17:   | 2014-15:<br>2015-16:<br>2016-17:  | 2014-15:<br>2015-16:<br>2016-17:   | 2014-15:<br>2015-16:<br>2016-17:   |
|                     |                 | 2014-15:<br>2015-16:<br>2016-17:   | 2014-15:<br>2015-16:<br>2016-17:   | 2014-15:<br>2015-16:<br>2016-17:  | 2014-15:<br>2015-16:<br>2016-17:   | 2014-15:<br>2015-16:<br>2016-17:   |
|                     |                 | 2014-15:<br>2015-16:<br>2016-17:   | 2014-15:<br>2015-16:<br>2016-17:   | 2014-15:<br>2015-16:<br>2016-17:  | 2014-15:<br>2015-16:<br>2016-17:   | 2014-15:<br>2015-16:<br>2016-17:   |
|                     |                 | 2014-15:<br>2015-16:<br>2016-17:   | 2014-15:<br>2015-16:<br>2016-17:   | 2014-15:<br>2015-16:<br>2016-17:  | 2014-15:<br>2015-16:<br>2016-17:   | 2014-15:<br>2015-16:<br>2016-17:   |
|                     |                 | 2014-15:<br>2015-16:<br>2016-17:   | 2014-15:<br>2015-16:<br>2016-17:   | 2014-15:<br>2015-16:<br>2016-17:  | 2014-15:<br>2015-16:<br>2016-17:   | 2014-15:<br>2015-16:<br>2016-17:   |
|                     |                 | 2014-15:<br>2015-16:<br>2016-17:   | 2014-15:<br>2015-16:<br>2016-17:   | 2014-15:<br>2015-16:<br>2016-17:  | 2014-15:<br>2015-16:<br>2016-17:   | 2014-15:<br>2015-16:<br>2016-17:   |
|                     |                 | 2014-15:<br>2015-16:<br>2016-17:   | 2014-15:<br>2015-16:<br>2016-17:   | 2014-15:<br>2015-16:<br>2016-17:  | 2014-15:<br>2015-16:<br>2016-17:   | 2014-15:<br>2015-16:<br>2016-17:   |

**Comprehensive Strategic Finances**

|                           |   |
|---------------------------|---|
| <b>Agency Responding</b>  | South Carolina Transportation Infrastructure Bank |
| <b>Date of Submission</b> | September 15, 2017                                |

If the agency feels additional explanation of data provided in any of the sections below would assist those reading the document in better understanding the data please add a row under the applicable section, like the sample "Additional Notes" row under the first section, and type the additional explanation.

| Line #   | 2016-17 Comprehensive Strategic Spending  |       |   |    |   |    |   |    |
|--|---|-------|---|----|---|----|---|----|
| <b>Revenue Sources</b>   |   |       |   |    |   |    |   |    |
| 1A   | Revenue Source (do not combine recurring with one-time and please list the revenue sources deposited in the same Fund in SCEIS in consecutive columns)                                | Total |   |    |   |    |   |    |
|  |   | N/A   |   |    |   |    |   |    |
| 2A   | Recurring or one-time?  | N/A   |   |    |   |    |   |    |
| 3A   | State, Federal, or Other?   | N/A   |   |    |   |    |   |    |
| <b>Additional Explanation:</b>   |   |       |   |    |   |    |   |    |
| <b>Revenue Generated Last Year</b>   |   |       |   |    |   |    |   |    |
| 4A   | Total revenue generated by June 30, 2016 (end of 2015-16)   | \$    | - | \$ | - | \$ | - | \$ |
| 5A   | Does this revenue remain with the agency or go to the General Fund?   | N/A   |   |    |   |    |   |    |
| <b>Funds in SCEIS where Revenue deposited</b>  |   |       |   |    |   |    |   |    |
| 6A   | Fund # (Expendable Level - 8 digit) (full set of financials available for each through SCEIS); same Fund may be in multiple columns if multiple revenue sources are deposited into it | Total |   |    |   |    |   |    |
|  |   | N/A   |   |    |   |    |   |    |
| 7A   | Fund Description  | N/A   |   |    |   |    |   |    |
| <b>Cash Balances at Start of Year</b>  |   |       |   |    |   |    |   |    |
| 8A   | Cash balance as of July 1, 2016 (start of FY 2016-17) (see instructions for how to enter cash balances)   | \$    | - | \$ | - | \$ | - | \$ |
| <b>General Appropriations Act Programs</b>   |   |       |   |    |   |    |   |    |
| 9A   | State Funded Program #  | Total |   |    |   |    |   |    |
|  |   | N/A   |   |    |   |    |   |    |
| 10A  | State Funded Program Description in the General Appropriations Act  | N/A   |   |    |   |    |   |    |
| <b>Amounts Appropriated and Authorized</b>   |   |       |   |    |   |    |   |    |
| 11A  | Amounts appropriated, and amounts authorized, to the agency for 2015-16 that were not spent AND the agency is authorized to spend in 2016-17  | \$    | - | \$ | - | \$ | - | \$ |
| 12A  | 2016-17 Appropriations & Authorizations to agency (start of year)   | \$    | - | \$ | - | \$ | - | \$ |
| 13A  | <b>Total Appropriated and Authorized (i.e. allowed to spend) at start of 2016-17</b>  | \$    | - | \$ | - | \$ | - | \$ |
| 14A  | 2016-17 Appropriations & Authorizations to agency (during the year)   | \$    | - | \$ | - | \$ | - | \$ |
| 15A  | <b>Total Appropriated and Authorized (i.e. allowed to spend) by end of 2016-17</b>  | \$    | - | \$ | - | \$ | - | \$ |
| <b>How Spending is Tracked</b>   |   |       |   |    |   |    |   |    |
| 16A  | Database(s) through which expenditures are tracked  | Total |   |    |   |    |   |    |
|  |   | N/A   |   |    |   |    |   |    |
| <b>Spent toward Agency's 2016-17 Comprehensive Strategic Plan - By Strategy at a minimum, and if possible, by Objective</b>                |   |       |   |    |   |    |   |    |
| 17A  | Funding Source  | Total |   |    |   |    |   |    |
|  |   | N/A   |   |    |   |    |   |    |
| 18A  | If funding source is multi-year grant, # of years, including this yr, remaining   | N/A   |   |    |   |    |   |    |
| 19A  | External restrictions (from state/federal govt, grant issuer, etc.), if any, on how the agency can use the funds  | N/A   |   |    |   |    |   |    |
| 20A  | State Funded Program Description in the General Appropriations Act  | N/A   |   |    |   |    |   |    |
| 21A  | Total Appropriated and Authorized (i.e. allowed to spend) by the end of 2016-17   | \$    | - | \$ | - | \$ | - | \$ |
| Prior to receiving these report guidelines, did the agency have a comprehensive strategic plan? (enter Yes or No in the cell to the right) |   |       |   |    |   |    |   |    |
| <b>GOAL 1:</b>   |   |       |   |    |   |    |   |    |
| <b>Strategy 1.1: LOC Staff will fill in for agency</b>   |   |       |   |    |   |    |   |    |
| Objective 1.1.1: LOC Staff will fill in for agency   |   |       |   |    |   |    |   |    |
| Objective 1.1.2: LOC Staff will fill in for agency   |   |       |   |    |   |    |   |    |
| 22A  | <b>Total Spent toward Agency's Comprehensive Strategic Plan</b>   | \$    | - | \$ | - | \$ | - | \$ |
| <b>Spent/Transferred not toward Agency's Comprehensive Strategic Plan</b>  |   |       |   |    |   |    |   |    |
| 23A  | Unrelated Purpose #1 - insert description:  | \$    | - | \$ | - | \$ | - | \$ |
| Insert any additional unrelated purposes   |   |       |   |    |   |    |   |    |
| 24A  | <b>Total spent/transferred not toward agency's strategic plan</b>   | \$    | - | \$ | - | \$ | - | \$ |
| <b>Appropriations and Authorizations remaining at end of year</b>  |   |       |   |    |   |    |   |    |
| 25A  | Revenue Source  | Total |   |    |   |    |   |    |
|  |   | N/A   |   |    |   |    |   |    |
| 26A  | Recurring or one-time?  | N/A   |   |    |   |    |   |    |
| 27A  | State, Federal, or Other?   | N/A   |   |    |   |    |   |    |
| 28A  | State Funded Program Description in the General Appropriations Act  | N/A   |   |    |   |    |   |    |
| 29A  | Total Appropriated and Authorized (i.e. allowed to spend) by end of 2016-17   | \$    | - | \$ | - | \$ | - | \$ |
| 30A  | (minus) Spent to Achieve Agency's Comprehensive Strategic Plan  | \$    | - | \$ | - | \$ | - | \$ |
| 31A  | (minus) Spent/Transferred not toward Agency's Comprehensive Strategic Plan  | \$    | - | \$ | - | \$ | - | \$ |
| 32A  | Amount of appropriations and authorizations remaining   | \$    | - | \$ | - | \$ | - | \$ |
| <b>Cash Balances at end of year</b>  |   |       |   |    |   |    |   |    |
| 33A  | Fund Description  | Total |   |    |   |    |   |    |
|  |   | N/A   |   |    |   |    |   |    |
| 34A  | Cash balance as of June 30, 2017 (end of FY 2016-17) (enter the cash balance for each Fund only once; it should appear in the column where the Fund is first listed)                  | \$    | - | \$ | - | \$ | - | \$ |

**Comprehensive Strategic Finances**

| Line #   | 2017-18 Comprehensive Strategic Budgeting   |       |     |    |   |    |   |
|--|---|-------|-----|----|---|----|---|
| <b>Revenue Sources</b>   |   |       |     |    |   |    |   |
| 1B   | Revenue Source (do not combine recurring with one-time and please list the revenue sources deposited in the same Fund in SCEIS in consecutive columns)                                | Total | N/A | 0  | 0 | 0  | 0 |
| 2B   | Recurring or one-time?  | N/A   | 0   | 0  | 0 | 0  | 0 |
| 3B   | State, Federal, or Other?   | N/A   | 0   | 0  | 0 | 0  | 0 |
| <b>Additional Explanation:</b>   |   |       |     |    |   |    |   |
| <b>Revenue Generated Last Year</b>   |   |       |     |    |   |    |   |
| 4B   | Total revenue generated by June 30, 2017 (end of 2016-17) (BUDGETED)  | \$    | -   | \$ | - | \$ | - |
| 5B   | Does this revenue remain with the agency or go to the General Fund?   | N/A   | 0   | 0  | 0 | 0  | 0 |
| <b>Funds in SCEIS where Revenue deposited</b>  |   |       |     |    |   |    |   |
| 6B   | Fund # (Expendable Level - 8 digit) (full set of financials available for each through SCEIS); same Fund may be in multiple columns if multiple revenue sources are deposited into it | Total | N/A | 0  | 0 | 0  | 0 |
| 7B   | Fund Description  | N/A   | 0   | 0  | 0 | 0  | 0 |
| <b>Cash Balances at Start of Year</b>  |   |       |     |    |   |    |   |
| 8B   | Cash balance as of July 1, 2017 (start of FY 2017-18) (see instructions for how to enter cash balances)   | \$    | -   | \$ | - | \$ | - |
| <b>General Appropriations Act Programs</b>   |   |       |     |    |   |    |   |
| 9B   | State Funded Program #  | Total | N/A | 0  | 0 | 0  | 0 |
| 10B  | State Funded Program Description in the General Appropriations Act  | N/A   | 0   | 0  | 0 | 0  | 0 |
| <b>Amounts Appropriated and Authorized</b>   |   |       |     |    |   |    |   |
| 11B  | Amounts appropriated, and amounts authorized, to the agency for 2016-17 that were not spent AND the agency is authorized to spend in 2017-18  | \$    | -   | \$ | - | \$ | - |
| 12B  | 2017-18 Appropriations & Authorizations to agency (start of year)   | \$    | -   | \$ | - | \$ | - |
| 13B  | <b>Total Appropriated and Authorized (i.e. allowed to spend) at start of 2017-18</b>  | \$    | -   | \$ | - | \$ | - |
| 14B  | 2017-18 Appropriations & Authorizations to agency (during the year) (BUDGETED)  | \$    | -   | \$ | - | \$ | - |
| 15B  | <b>Total Appropriated and Authorized (i.e. allowed to spend) by end of 2017-18 (BUDGETED)</b>   | \$    | -   | \$ | - | \$ | - |
| <b>How Spending is Tracked</b>   |   |       |     |    |   |    |   |
| 16B  | Database(s) through which expenditures are tracked  | Total | N/A | 0  | 0 | 0  | 0 |
| <b>Budgeted toward Agency's 2017-18 Comprehensive Strategic Plan - By Strategy at a minimum, and if possible, by Objective</b>             |   |       |     |    |   |    |   |
| 17B  | Funding Source  | N/A   | 0   | 0  | 0 | 0  | 0 |
| 18B  | If funding source is multi-year grant, # of years, including this yr, remaining   | N/A   | 0   | 0  | 0 | 0  | 0 |
| 19B  | External restrictions (from state/federal govt, grant issuer, etc.), if any, on how the agency can use the funds  | N/A   | 0   | 0  | 0 | 0  | 0 |
| 20B  | State Funded Program Description in the General Appropriations Act  | N/A   | 0   | 0  | 0 | 0  | 0 |
| 21B  | <b>Total Appropriated and Authorized (i.e. allowed to spend) by end of 2017-18 (BUDGETED)</b>   | \$    | -   | \$ | - | \$ | - |
| Prior to receiving these report guidelines, did the agency have a comprehensive strategic plan? (enter Yes or No in the cell to the right) |   |       |     |    |   |    |   |
| <b>GOAL 1:</b>   |   |       |     |    |   |    |   |
| <b>Strategy 1.1: LOC Staff will fill in for agency</b>   |   |       |     |    |   |    |   |
| <b>Objective 1.1.1: LOC Staff will fill in for agency</b>  |   |       |     |    |   |    |   |
| <b>Objective 1.1.2: LOC Staff will fill in for agency</b>  |   |       |     |    |   |    |   |
| 22B  | <b>Total Spent toward Agency's Comprehensive Strategic Plan (BUDGETED)</b>  | \$    | -   | \$ | - | \$ | - |
| <b>Spent/Transferred not toward Agency's Comprehensive Strategic Plan</b>  |   |       |     |    |   |    |   |
| 23B  | <b>Unrelated Purpose #1 - insert description:</b>   | \$    | -   | \$ | - | \$ | - |
| <b>Insert any additional unrelated purposes</b>  |   |       |     |    |   |    |   |
| 24B  | <b>Total spent/transferred not toward agency's strategic plan (BUDGETED)</b>  | \$    | -   | \$ | - | \$ | - |
| <b>Appropriations and Authorizations remaining at end of year</b>  |   |       |     |    |   |    |   |
| 25B  | Revenue Source  | Total | N/A | 0  | 0 | 0  | 0 |
| 26B  | Recurring or one-time?  | N/A   | 0   | 0  | 0 | 0  | 0 |
| 27B  | State, Federal, or Other?   | N/A   | 0   | 0  | 0 | 0  | 0 |
| 28B  | State Funded Program Description in the General Appropriations Act  | N/A   | 0   | 0  | 0 | 0  | 0 |
| 29B  | <b>Total Appropriated and Authorized (i.e. allowed to spend) by end of 2017-18 (BUDGETED)</b>   | \$    | -   | \$ | - | \$ | - |
| 30B  | (minus) Spent to Achieve Agency's Comprehensive Strategic Plan (BUDGETED)   | \$    | -   | \$ | - | \$ | - |
| 31B  | (minus) Spent/Transferred not toward Agency's Comprehensive Strategic Plan (BUDGETED)   | \$    | -   | \$ | - | \$ | - |
| 32B  | <b>Amount of appropriations and authorizations remaining (BUDGETED)</b>   | \$    | -   | \$ | - | \$ | - |
| <b>Cash Balances at end of year</b>  |   |       |     |    |   |    |   |
| 33B  | Fund Description  | Total | N/A | 0  | 0 | 0  | 0 |
| 34B  | Cash balance as of June 30, 2018 (end of FY 2017-18) (enter the cash balance for each Fund only once; it should appear in the column where the Fund is first listed) (BUDGETED)       | \$    | -   | \$ | - | \$ | - |