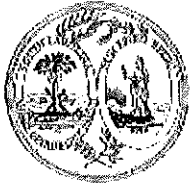


Agency Name:  
Agency Code:

Retirement System Investment Commission  
E190

Section:

99



Fiscal Year FY 2022-2023  
Agency Budget Plan

**FORM A - BUDGET PLAN SUMMARY**

**OPERATING  
REQUESTS**  
  
*(FORM B1)*

For FY 2022-2023, my agency is (mark "X"):	
<input type="checkbox"/>	Requesting General Fund Appropriations.
<input type="checkbox"/>	Requesting Federal/Other Authorization.
<input checked="" type="checkbox"/>	Not requesting any changes.

**NON-RECURRING  
REQUESTS**  
  
*(FORM B2)*

For FY 2022-2023, my agency is (mark "X"):	
<input type="checkbox"/>	Requesting Non-Recurring Appropriations.
<input type="checkbox"/>	Requesting Non-Recurring Federal/Other Authorization.
<input checked="" type="checkbox"/>	Not requesting any changes.

**CAPITAL  
REQUESTS**  
  
*(FORM C)*

For FY 2022-2023, my agency is (mark "X"):	
<input type="checkbox"/>	Requesting funding for Capital Projects.
<input checked="" type="checkbox"/>	Not requesting any changes.

**PROVISOS**  
  
*(FORM D)*

For FY 2022-2023, my agency is (mark "X"):	
<input type="checkbox"/>	Requesting a new proviso and/or substantive changes to existing provisos.
<input type="checkbox"/>	Only requesting technical proviso changes (such as date references).
<input checked="" type="checkbox"/>	Not requesting any proviso changes.

Please identify your agency's preferred contacts for this year's budget process.

**PRIMARY  
CONTACT:**  
**SECONDARY  
CONTACT:**

	<u>Name</u>	<u>Phone</u>	<u>Email</u>
	Michael Hitchcock	(803) 737-6885	mhitchcock@rsic.sc.gov
	Kara Brurok	(803) 737-6814	kbrurok@rsic.sc.gov

I have reviewed and approved the enclosed FY 2022-2023 Agency Budget Plan, which is complete and accurate to the extent of my knowledge.

**SIGN/DATE:**  
**TYPE/PRINT  
NAME:**

<u>Agency Director</u>	<u>Board or Commission Chair</u>
 8/26/21	 8/26/21
Michael R. Hitchcock	William H. Hancock

*This form must be signed by the agency head – not a delegate.*