

Title IIIC-1 Area Agency Administration Financial Report

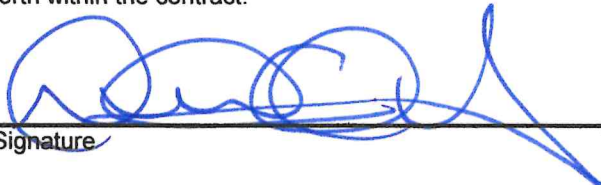
Final Report [] YES [X] NO

Agency: EAST BATON ROUGE COUNCIL ON AGING, INC.

Period Month Ending: 31-Jan-25

Gross Expenditures to Date	76,671
Operating Transfers in -ARP IIIAAA	
Less: Other/ Local Funds	
Less: Transfers Out-ARP IIIAAA	
Net Expenditures to Date	76,671
GOEA Funds Received to date	76,673
Cash on Hand	2

I hereby certify that the above expenditures are for the period shown above (year to date), and are true and correct to the best of my knowledge. The expenditures reported have been made in accordance with federal and state guidelines and as outlined in the contract summary, and are for the purpose set forth within the contract.



Signature

CHIEF EXECUTIVE OFFICER
Title

DYTASHA CLARK AMAR
Typed Name

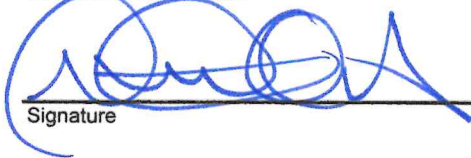
Title IIIC-1 Congregate Meals Financial Report

Final Report [] YES [X] NO

Agency: East Baton Rouge Council on Aging
 Period Month Ending: 31-Jan-25

	Direct Costs	Indirect Costs	Total Costs
Indirect Costs		271,576	
Congregate Meals	1,200,334	271,576	1,471,910
[Raw Food Costs: \$57,937.20]	-		-
Nutrition Counseling	-		-
Nutrition Education	-		-
Outreach			-
***Operating Transfers Out to - IIIC-2	-	-	-
Gross Expenditures	1,200,334	271,576	1,471,910
Less: Participant Contributions			-
Less: Sale of Meals			-
Less: NSIP Cash			1,080,469
Less: Other/Local Funds			-
Operating Transfers In - SC			
Operating Transfers In - PCOA			55,483
			-
Net Expenditures			335,958
GOEA Funds Received to Date			335,957
Cash on Hand			(1)

I hereby certify that the above expenditures are for the period shown above (year to date), and are true and correct to the best of my knowledge. The expenditures reported have been made in accordance with federal and state guidelines and as outlined in the contract summary, and are for the purpose set forth within the contract.



Signature

CEO
Title

Date

Title IIIC-2 Home Delivered Meals Financial Report

Final Report () Yes (X) No

Agency: East Baton Rouge Council on Aging
 Period Month Ending: 31-Jan-25

	Direct Costs	Indirect Costs	Total Costs
Indirect Costs		300,370	
Home Delivered Meals	1,547,654	300,370	1,848,024
COVID 19 HDM:			
[Raw Food Costs: \$57,937.20]			
Nutrition Counseling	-		-
Nutrition Education	-		-
Outreach			-
Gross Expenditures	1,547,654	300,370	1,848,024
Less: Participant Contributions			-
Less: Sale of Meals			-
Less: NSIP Cash			-
Less: Other/Local Funds			1,528,264
Operating Transfers In - SC			-
			-
***Operating Transfers In - IIID			-
***Operating Transfers In -IIIE			-
Net Expenditures			319,760
GOEA Funds Received to Date			319,757
Cash on Hand			(3)

I hereby certify that the above expenditures are for the period shown above (year to date), and are true and correct to the best of my knowledge. The expenditures reported have been made in accordance with federal and state guidelines and as outlined in the contract summary, and are for the purpose set forth within the contract.


 Signature _____ Title CEO

_____ Date

Dytrasha Clark Amar
 Printed Name

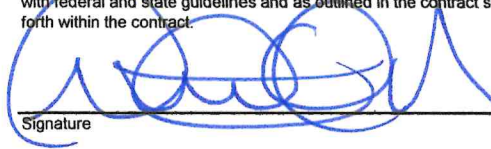
Title IIIB Supportive Services Financial Report

Final Report [] YES [X] NO

Agency: East Baton Rouge Council on Aging
 Period Month Ending: Jan-25

	Direct Costs	Indirect Costs	Total Costs
Indirect Costs		52269	
1 COVID-19 DNI MEALS			0
2 COVID-19 NON-DNI MEALS			0
3 Assisted Transportation			0
4 Case Management			0
5 Chore			0
6 Homemaker			0
7 Information and Assistance	239,281	42,338	281,619
8 Legal Assistance	-		-
9 Outreach	11,816	2,091	13,907
10 Personal Care	-	-	-
11 Transportation			-
12 Telephoning	17,725	3,136	20,861
13 Home Repair / Modification			-
14 Visiting			-
15 Total Other Priority Services (12+13+14)	17,725	3,136	20,861
16 Counseling			-
17 Crime Prevention Services			-
18 Material Aid	26,587	4,704	31,291
19 Medical Alert			-
20 Medication Management			-
21 Placement Services			-
22 Public Education			-
23 Recreation			-
24 Sitter Service			-
25 Utility Assistance			-
26 Wellness			-
27 Total Other Non Priority Services (16 through 26)	26,587	4,704	31,291
28 Gross Expenditures ((1 through 11)+15+27)	295,409	52,269	347,678
29 Less: Participant Contributions			
30 Less: Other/Local Funds			67,677
31 Operating Transfers In - SC			
32 Operating Transfers In - PCOA			55,483
33 Operating Transfers In - Supp SC			-
***Operating Transfers In - IIID			-
			-
34 Net Expenditures (28-(29 through 33))			224,518
35 GOEA Funds Received To Date			224,515
36 Cash on Hand (35 -34)			(3)

I hereby certify that the above expenditures are for the period shown above (year to date), and are true and correct to the best of my knowledge. The expenditures reported have been made in accordance with federal and state guidelines and as outlined in the contract summary, and are for the purpose set forth within the contract.



Signature _____ CEO _____ Title _____ Date _____

Dytasha Clark Amar _____
 Printed Name

Title IIID Preventive Health Financial Report

Final Report [] YES [X] NO

Agency: East Baton Rouge Council On aging
 Period Month Ending: 31-Jan-25

	Direct Costs	Indirect Costs	Total Costs
Indirect Costs			
Nutrition Counseling			0
Nutrition Education			0
Other Services:			
Counseling			0
Medication Management			0
Wellness	7,217		7,217
***Operating Tranfer Out to - IIIC2	-		-
Gross Expenditures	7,217	0	7,217
Less: Participant Contributions			
Less: Other/Local Funds			-
Operating Transfers In - ARP IIID			0
Operating Transfers In - PCOA			
Net Expenditures			7,217
GOEA Funds Received to Date			7,213
Cash on Hand			(4)

I hereby certify that the above expenditures are for the period shown above (year to date), and are true and correct to the best of my knowledge. The expenditures reported have been made in accordance with federal and state guidelines and as outlined in the contract summary, and are for the purpose set forth within the contract.


 Signature _____ CEO
 Title

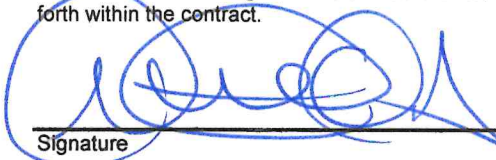
Title III E National Family Caregiver Support Financial Report

Final Report [] YES [X] NO

Agency: East Baton Rouge Council On Aging
 Period Month Ending: 31-Jan-25

	Direct Costs	Indirect Costs	Total Costs
Indirect Costs		1,310	
NFCSP Public Education			
NFCSP Information and Assistance	59,800	2,233	62,033
NFCSP Outreach			
NFCSP Case Management	-		
NFCSP Individual Counseling			
NFCSP Support Groups			
NFCSP Adult Day Care	43,750		43,750
NFCSP Adult Day Health Care			
NFCSP Group Respite	-	-	
NFCSP In-Home Respite	-		-
NFCSP Individual Care Support			
NFCSP Institutional Respite			
NFCSP Material aid	-		-
NFCSP Personal Care	-	-	
NFCSP Sitter Service			
NFCSP Chore			
NFCSP Home Repair/Modification			
NFCSP Home Delivered Meals			
***Operating Transfers Out to - IIIB	-	-	
***Operating Transfers Out to- IIIC-2	-	-	
Gross Expenditures	103,550	2,233	105,783
Less: Participant Contributions			
Less: Other/Local Funds			36,070
Operating Transfers In - ARP III E			-
Operating Transfers In - PCOA			
Operating Transfers In - Sup SC			
Net Expenditures			69,713
GOEA Funds Received to Date			69,713
Cash on Hand			-

I hereby certify that the above expenditures are for the period shown above (year to date), and are true and correct to the best of my knowledge. The expenditures reported have been made in accordance with federal and state guidelines and as outlined in the contract summary, and are for the purpose set forth within the contract.


 Signature _____ CEO
 Title

Date _____