

# Title IIIC-1 Area Agency Administration Financial Report

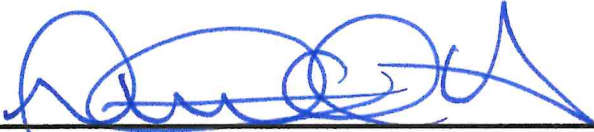
Final Report [ ] YES [X] NO

Agency: EAST BATON ROUGE COUNCIL ON AGING, INC.

Period Month Ending: 31-Dec-25

Gross Expenditures to Date	64,674
Operating Transfers in -ARP IIIAAA	
Less: Other/ Local Funds	
Less: Transfers Out-ARP IIIAAA	
Net Expenditures to Date	64,674
GOEA Funds Received to date	64,674
Cash on Hand	0

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

1/15/2026  
Date

DYTASHA CLARK AMAR  
Typed Name

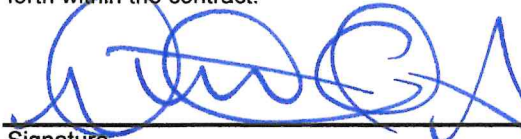
# Title IIIC-1 Congregate Meals Financial Report

Final Report [ ] YES [X] NO

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

	Direct Costs	Indirect Costs	Total Costs
Indirect Costs		179,600	
Congregate Meals	702,408	179,600	882,008
[Raw Food Costs: \$68,539.05]	-		-
Nutrition Counseling	-		-
Nutrition Education	-		-
Outreach			-
***Operating Transfers Out to - IIIC-2	-	-	-
<b>Gross Expenditures</b>	<b>702,408</b>	<b>179,600</b>	<b>882,008</b>
Less: Participant Contributions			-
Less: Sale of Meals			-
Less: NSIP Cash			20,271
Less: Other/Local Funds			538,252
Operating Transfers In - SC			-
Operating Transfers In - PCOA			59,389
			-
<b>Net Expenditures</b>			<b>264,096</b>
<b>GOEA Funds Received to Date</b>			<b>264,096</b>
<b>Cash on Hand</b>			<b>-</b>

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 Signature \_\_\_\_\_ CEO  
 Title

Date 1/15/2026

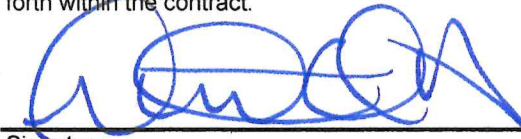
# Title IIIC-2 Home Delivered Meals Financial Report

Final Report ( ) Yes (X) No

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

	Direct Costs	Indirect Costs	Total Costs
Indirect Costs		346,016	
Home Delivered Meals	1,353,253	346,016	1,699,269
<b>COVID 19 HDM:</b>			
[Raw Food Costs: \$107,025.92]			
Nutrition Counseling	-		-
Nutrition Education	-		-
Outreach			-
<b>Gross Expenditures</b>	<b>1,353,253</b>	<b>346,016</b>	<b>1,699,269</b>
Less: Participant Contributions			-
Less: Sale of Meals			-
Less: NSIP Cash			60,812
Less: Other/Local Funds			1,339,891
Operating Transfers In - SC			
			-
			-
<b>***Operating Transfers In - IIID</b>			-
<b>***Operating Transfers In -IIIE</b>			-
<b>Net Expenditures</b>			<b>298,566</b>
<b>GOEA Funds Received to Date</b>			<b>298,566</b>
<b>Cash on Hand</b>			<b>-</b>

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 15-Jan-26

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: 12/31/2025

	Direct Costs	Indirect Costs	Total Costs
Indirect Costs		61304	
<b>1 COVID-19 DNI MEALS</b>			0
<b>2 COVID-19 NON-DNI MEALS</b>			0
3 Assisted Transportation			0
4 Case Management			0
5 Chore			0
6 Homemaker			0
7 Information and Assistance	155,589	39,783	195,372
8 Legal Assistance	-		-
9 Outreach	2,104	538	2,642
10 Personal Care	-	-	-
11 Transportation			-
12 Telephoning	21,043	5,380	26,423
13 Home Repair / Modification			-
14 Visiting			-
15 Total Other Priority Services (12+13+14)	21,043	5,380	26,423
16 Counseling			-
17 Crime Prevention Services			-
18 Material Aid	61,024	15,603	76,627
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)	61,024	15,603	76,627
28 Gross Expenditures ((1 through 11)+15+27)	239,760	61,304	301,064
29 Less: Participant Contributions			
30 Less: Other/Local Funds			49,409
31 Operating Transfers In - SC			
32 Operating Transfers In - PCOA			59,390
33 Operating Transfers In - Supp SC			-
<b>***Operating Transfers In - IIID</b>			-
			-
34 Net Expenditures (28-(29 through 33))			192,265
35 GOEA Funds Received To Date			192,265
36 Cash on Hand (35 -34)			-

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Signature \_\_\_\_\_ Title CEO Date 1/15/2026  
 Printed Name Dytasha Clark Amar


# Title IIID Preventive Health Financial Report

Final Report [ ] YES [ X ] NO

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

	Direct Costs	Indirect Costs	Total Costs
Indirect Costs			
Nutrition Counseling			
Nutrition Education			
<b>Other Services:</b>			
Counseling			
Medication Management			
Wellness	6,666		6,666
***Operating Tranfer Out to - IILC2	-		-
<b>Gross Expenditures</b>	<b>6,666</b>		<b>6,666</b>
Less: Participant Contributions			
Less: Other/Local Funds			-
Operating Transfers In - ARP IIID			
Operating Transfers In - PCOA			
<b>Net Expenditures</b>			<b>6,666</b>
<b>GOEA Funds Received to Date</b>			<b>6,666</b>
<b>Cash on Hand</b>			<b>-</b>

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 1/15/2026



# Title III E National Family Caregiver Support Financial Report

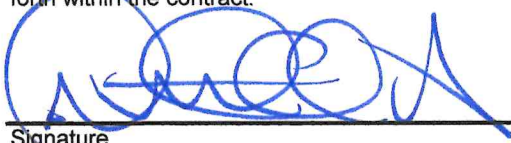
Final Report [ ] YES [ X ] NO

Agency: East Baton Rouge Council On Aging

Period Month Ending: 31-Dec-25

	Direct Costs	Indirect Costs	Total Costs
<b>Indirect Costs</b>		17,371	
NFCSP Public Education			
NFCSP Information and Assistance	51,883	13,266	65,149
NFCSP Outreach			
NFCSP Case Management	-		
NFCSP Individual Counseling			
NFCSP Support Groups			
NFCSP Adult Day Care	-		-
NFCSP Adult Day Health Care			-
NFCSP Group Respite	16,055	4,105	20,160
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	67,938	17,371	85,309
Less: Participant Contributions			
Less: Other/Local Funds			25,561
Operating Transfers In - ARP III E			-
Operating Transfers In - PCOA			
Operating Transfers In - Sup SC			
Net Expenditures			59,748
GOEA Funds Received to Date			59,748
Cash on Hand			-

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CEO  
Title

1/15/2026  
Date

Signature

Date

# Senior Center Financial Report

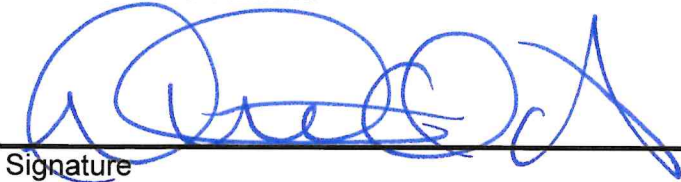
Final Report [ ] YES [X] NO

Agency: EAST BATON ROUGE COUNCIL ON AGING, INC.

Period Quarter Ending: 31-Dec-25

Senior Center Operational Costs	1,329,877
Operating Transfers Out - IIIB-SS	
Operating Transfers Out - III-C1	
Operating Transfers Out - III-C2	
Operating Transfers Out - III-D	
Operating Transfers Out - III-E	
Operating Transfers Out - Ombudsman	
Gross Expenditures to Date	1,329,877
Less Other/Local Funds	1,049,165
Operating Transfers In - Supp SC	29,654
Operating Transfers In - Suppl SC #2	3,906
Net Expenditures	247,152
GOEA Funds Received to Date	247,152
Cash on Hand	0

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.




1/15/2026

Signature

Title

Date

DYTASHA CLARK AMAR

Typed Name



# Supplemental Senior Center Financial Report

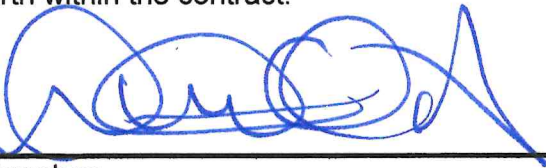
Final Report [ ] YES [X] NO

Agency: EAST BATON ROUGE COUNCIL ON AGING, INC.

Period Quarter Ending: 31-Dec-25

Operating Transfers Out - III-B/SS	
Operating Transfers Out - III-C1	
Operating Transfers Out - III-C2	
Operating Transfers Out - III-D	
Operating Transfers Out - III-E	
Operating Transfers Out - SC	29,654
Operating Transfers Out - Ombusmen	
Total Transferred Out	29,654
Goea Funds Received to Date	29,654
Cash on Hand	0

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Signature

CHIEF EXECUTIVE OFFICER

Title

DYTASHA CLARK AMAR

Typed Name

15-Jan-26



# Supplemental Senior Center Financial Report #2

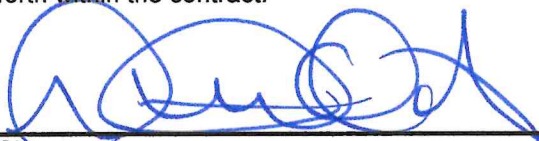
Final Report [ ] YES [X] NO

Agency: EAST BATON ROUGE COUNCIL ON AGING, INC.

Period Quarter Ending: 31-Dec-25

Operating Transfers Out - III-B/SS	
Operating Transfers Out - III-C1	
Operating Transfers Out - III-C2	
Operating Transfers Out - III-D	
Operating Transfers Out - III-E	
Operating Transfers Out - SC	3,906
Operating Transfers Out - Ombusmen	
Total Transferred Out	3,906
Goea Funds Received to Date	3,906
Cash on Hand	0

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

15-Jan-26

# Parish Council on Aging PCOA Financial Report

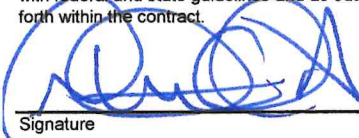
Final Report [ ] YES [x] NO

Agency: EAST BATON ROUGE COUNCIL ON AGING, INC.

Period Quarter Ending: \_\_\_\_\_ 31-Dec-25

PCOA Discretionary Expenditures	
Operating Transfers Out - AAA	
Operating Transfers Out - IIIB-SS	59,390
Operating Transfers Out - III-C1	59,389
Operating Transfers Out - III-C2	
Operating Transfers Out - III-D	
Operating Transfers Out - III-E	
Operating Transfers Out - SC	
Operating Transfers Out - Ombudsman	
Operating Transfers Out - Other	
Gross Expenditures to Date	118,779
Less Other/Local Funds	
Net Expenditures	118,779
GOEA Funds Received to Date	118,779
Cash on Hand	0

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.


CEO
1/15/2026  
 \_\_\_\_\_  
 Signature Title Date

DYTASHA CLARK AMAR  
 \_\_\_\_\_  
 Typed Name

Governor's Office of Elderly Affairs

GOEA Program Income Supplement Report

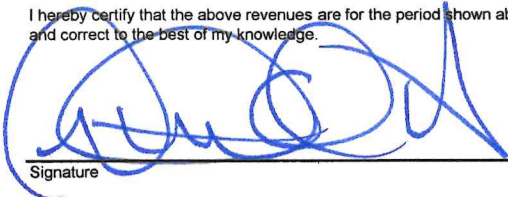
Final Report [ ] YES [X] NO

Agency: EAST BATON ROUGE COUNCIL ON AGING, INC.

Quarter Ending: December 31, 2025

	IIIB	IIIC-1	IIIC-2	IIID	IIIE	Totals
1. Outreach	0	0	0			0
2. Information and Assistance	0	0	0			0
3. Legal Assistance	0					0
4. Case Management	0					0
5. Adult Day Health Care	0					0
6. Assisted Transportation	0					0
7. Chore	0					0
8. Homemaker	0					0
9. Personal Care	0					0
10. Transportation	0					0
11. Other Services:	0					0
12. Congregate Meals		0				0
13. Nutrition Counseling		0	0	0		0
14. Nutrition Education		0	0	0		0
15. Home-Delivered Meals			0			0
16. Counseling				0		0
17. Medication Management				0		0
18. Wellness				0		0
19. NFCSP Individual Counseling					0	0
20. NFCSP Support Groups					0	0
<b>21. Counseling and Training Total (19 + 20)</b>					0	0
22. NFCSP Adult Day Care					0	0
23. NFCSP Adult Day Health Care					0	0
24. NFCSP Group Respite					0	0
25. NFCSP In-Home Respite					0	0
26. NFCSP Individual Care Support					0	0
27. NFCSP Institutional Respite					0	0
<b>28. Respite Care Total (22 through 27)</b>					0	0
29. NFCSP Material Aid					0	0
30. NFCSP Personal Care					0	0
31. NFCSP Sitter Service					0	0
32. NFCSP Chore					0	0
33. NFCSP Home Delivered Meals					0	0
34. NFCSP Home Repair/Modification					0	0
<b>35. Supplemental Services Total (29 through 34)</b>					0	0
36. NFCSP Information and Assistance					0	0
37. NFCSP Outreach					0	0
38. NFCSP Case Management					0	0
<b>39. Access Assistance Services Total (36 through 38)</b>					0	0
40. NFCSP Public Education					0	0
<b>41. Information Services Total (40)</b>					0	0
<b>Totals</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>

I hereby certify that the above revenues are for the period shown above (year to date), and are true and correct to the best of my knowledge.



Signature

CHIEF EXECUTIVE OFFICER  
Title

1/15/2026  
Date

DYTASHA CLARK AMAR  
Typed Name



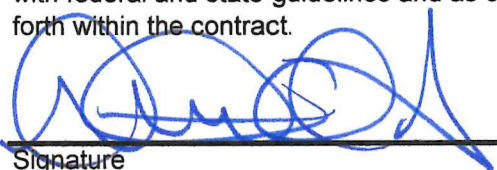
**FY 15 Act 55/Supplemental PCOA Financial Report**

Final Report [ ] YES [X] NO

**Agency:** East Baton Rouge Council on Aging  
**Period Quarter Ending:** 31-Dec-25

PCOA Discretionary Expenditures		0
Operating Transfers Out - AAA		
Operating Transfers Out - IIIB-SS		0.00
Operating Transfers Out - III-C1		
Operating Transfers Out - III-C2		
Operating Transfers Out - III-D		
Operating Transfers Out - III-E		
Operating Transfers Out - SC		3,906.00
Operating Transfers Out - Ombudsman		
Operating Transfers Out - Other		
Gross Expenditures to Date		3,906.00
Less Other/Local Funds		
Net Expenditures		3,906.00
GOEA Funds Received to Date	\$	3,906.00
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.



Executive Director  
 Title

Dytasha Clark Amar  
 Typed Name

1/15/2026  
 Date  
**Revised 9/2014**