## **Client Served Report Report Options** Reporting Group Food Shelter- A Friends House Provider (ES) (12482) ○ <u>This provider AND its subordinates</u> • <u>This provider ONLY</u> Services ✓ <u>Services Provided (other than shelter or referred services)</u> ✓ Shelter Stays ☐ Referrals Served by the Selected Provider(s) Grouping Funding Source Service Code -Select- ∨ Served Date Range 09/01/2024 to 09/30/2024 Served Before Date Range (Old client count) to Treat Open-Ended Services/Referrals as 1-day Yes ○ No Services Legal Adult Age 18

## **Report Details**

LIENTS SERVED	Old	New	Total
Adults	0	89	89
Male	0	49	49
Female	0	37	37
No Single Gender	0	1	1
Questioning	0	0	0
Transgender	0	2	2
Client Doesn't Know/Client Refused	0	0	0
Data Not Collected	0	0	0
. Children	0	0	0
Male	0	0	0
Female	0	0	0
No Single Gender	0	0	0
Questioning	0	0	0
Transgender	0	0	0
Client Doesn't Know/Client Refused	0	0	0

Data Not Collected	0	0	0
Total (A+B)	0	89	89
AMILY MEMBERS SERVED	Old	New	Total
A. Adults	0	0	0
Male	0	0	0
Female	0	0	0
No Single Gender	0	0	0
Questioning	0	0	0
Transgender	0	0	0
Client Doesn't Know/Client Refused	0	0	0
Data Not Collected	0	0	0
. Children	0	0	0
Male	0	0	0
Female	0	0	0
No Single Gender	0	0	0
Questioning	0	0	0
Transgender	0	0	0
Client Doesn't Know/Client Refused	0	0	0
Data Not Collected	0	0	0
. Total (A+B)	0	0	0
. Total Households Served	0	0	0
. Average Household Members Served	0	0	0
INGLES SERVED	Old	New	Total
. Adults	0	89	89
Male	0	49	49
Female	0	37	37
No Single Gender	0	1	1
Questioning	0	0	0
Transgender	0	2	2
Client Doesn't Know/Client Refused	0	0	0
Data Not Collected	0	0	0
. Children	0	0	0
Male	0	0	0

Female						0		0	0
No Single Gender						0		0	0
Questioning				0		0	0		
Transgender						0		0	0
Client Doesn't Know/Client Refused						0		0	0
Data Not Collected						0		0	0
C. Total (A+B)						0	0 89		89
FAMILY MEMBERS	Children			Adults					
	0-5	6-12	13-17	18-30	31-50	51-61	62+	No DOB	Total
Male	0	0	0	0	0	0	0	0	0
Female	0	0	0	0	0	0	0	0	0
No Single Gender	0	0	0	0	0	0	0	0	0
Questioning	0	0	0	0	0	0	0	0	0
Transgender	0	0	0	0	0	0	0	0	0
Client Doesn't Know/Client Refused	0	0	0	0	0	0	0	0	0
Data Not Collected	0	0	0	0	0	0	0	0	0
otal	0	0	0	0	0	0	0	0	0
BINGLES	Children			Adults					
	0-5	6-12	13-17	18-30	31-50	51-61	62+	No DOB	Total
Male	0	0	0	7	20	14	8	0	49
Female	0	0	0	6	13	14	4	0	37
No Single Gender	0	0	0	1	0	0	0	0	1
Questioning	0	0	0	0	0	0	0	0	0
Transgender	0	0	0	1	0	1	0	0	2
Client Doesn't Know/Client Refused	0	0	0	0	0	0	0	0	0
Data Not Collected	0	0	0	0	0	0	0	0	0
Fotal State of the	0	0	0	15	33	29	12	0	89
CLIENTS SERVED BY RACE							Sec	condary Total	Total
American Indian, Alaska Native, or Indigenous	(HUD)								3
Not Given								3	
Asian or Asian American (HUD)							1		
Not Given 1						1			
Black, African American, or African (HUD)									12
American Indian, Alaska Native, or Indigenous (HUD)								1	

Not Given				10	
Other				1	
Data not collected (HUD)					1
Not Given				1	
White (HUD)					34
Data not collected (HUD)				1	
Native Hawaiian or Pacific Islander (HUD)				2	
Not Given				31	
Not Given					38
Total					89
CLIENTS SERVED BY ETHNICITY					Total
Data not collected (HUD)					1
Hispanic/Latin(a)(o)(x) (HUD)					2
Non-Hispanic/Non-Latin(a)(o)(x) (HUD)					48
Not Given					38
Total					89
SERVICE COUNT					
Service Type	Funding Source	Total Referral	Total Provided	Total Cost	Avg Cos
Emergency Shelter (BH-1800)	N/A	0	130	\$0.00	\$0.00
Total (Service Types: 1, Funding Sources: 0) 0 130			130	\$0.00	\$0.00