

# Client Served Report

## Report Options

Reporting Group	
Provider	Food Shelter- A Friends House (ES) (12482)
	<input type="radio"/> <u>This provider AND its subordinates</u> <input checked="" type="radio"/> <u>This provider ONLY</u>
Services	<input checked="" type="checkbox"/> <u>Services Provided (other than shelter or referred services).</u> <input checked="" type="checkbox"/> <u>Shelter Stays</u> <input type="checkbox"/> <u>Referrals Served by the Selected Provider(s).</u>
Grouping	<input checked="" type="radio"/> <u>Clients Receiving Services as a Family.</u> <input type="radio"/> <u>Clients in a Household</u>
Funding Source	
Service Code	-Select- ▼
Served Date Range	08/01/2024 to 08/31/2024
Served Before Date Range (Old client count)	to
Treat Open-Ended Services/Referrals as 1-day Services	<input checked="" type="radio"/> <u>Yes</u> <input type="radio"/> <u>No</u>
Legal Adult Age	18

## Report Details

CLIENTS SERVED	Old	New	Total
<b>A. Adults</b>	<b>0</b>	<b>103</b>	<b>103</b>
Male	0	60	60
Female	0	40	40
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
<b>B. Children</b>	<b>0</b>	<b>0</b>	<b>0</b>
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
<b>C. Total (A+B)</b>	<b>0</b>	<b>103</b>	<b>103</b>
<b>FAMILY MEMBERS SERVED</b>	<b>Old</b>	<b>New</b>	<b>Total</b>
<b>A. Adults</b>	<b>0</b>	<b>0</b>	<b>0</b>
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
<b>B. Children</b>	<b>0</b>	<b>0</b>	<b>0</b>
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
<b>C. Total (A+B)</b>	<b>0</b>	<b>0</b>	<b>0</b>
<b>D. Total Households Served</b>	<b>0</b>	<b>0</b>	<b>0</b>
<b>E. Average Household Members Served</b>	<b>0</b>	<b>0</b>	<b>0</b>
<b>SINGLES SERVED</b>	<b>Old</b>	<b>New</b>	<b>Total</b>
<b>A. Adults</b>	<b>0</b>	<b>103</b>	<b>103</b>
Male	0	60	60
Female	0	40	40
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
<b>B. Children</b>	<b>0</b>	<b>0</b>	<b>0</b>
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	103	103

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
Total	0	0	0	0	0	0	0	0	0

SINGLES	Children			Adults					
	0-5	6-12	13-17	18-30	31-50	51-61	62+	No DOB	Total
Male	0	0	0	12	26	13	9	0	60
Female	0	0	0	4	17	14	4	1	40
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
Total	0	0	0	18	43	28	13	1	103

CLIENTS SERVED BY RACE							Secondary Total	Total
American Indian, Alaska Native, or Indigenous (HUD)								6
Not Given							6	
Asian or Asian American (HUD)								1
Not Given							1	
Black, African American, or African (HUD)								8
American Indian, Alaska Native, or Indigenous (HUD)							1	

Not Given			6			
Other			1			
Data not collected (HUD)				1		
Not Given			1			
White (HUD)				47		
American Indian, Alaska Native, or Indigenous (HUD)			2			
Native Hawaiian or Pacific Islander (HUD)			2			
Not Given			43			
Not Given				40		
Total				103		
CLIENTS SERVED BY ETHNICITY				Total		
Data not collected (HUD)				1		
Hispanic/Latin(a)(o)(x) (HUD)				4		
Non-Hispanic/Non-Latin(a)(o)(x) (HUD)				58		
Not Given				40		
Total				103		
SERVICE COUNT						
Service Type		Funding Source	Total Referral	Total Provided	Total Cost	Avg Cost
Emergency Shelter (BH-1800)		N/A	0	137	\$0.00	\$0.00
Total (Service Types: 1, Funding Sources: 0)			0	137	\$0.00	\$0.00