

**COVID Supplemental (FFCRA, CARES, Supplement 5 or MDD-Flexibility) Funding Template**  
**Report ONLY services that were provided partially or fully with COVID supplemental funds.**

				Amount of FFCRA Funding	Amount of CARES Funding	Amount of COVID "Supplement #5" Funding	Amount of MDD-Flexibility Funding	Total Funding Used for This Service
Service Category	Number of People Provided this Service	Number of Units of this Service		<i>Indicate in the rows below the amount of FFCRA funds you used toward each service during the period of 4/1/20-3/31/21.</i>	<i>Indicate in the rows below the amount of CARES funds you used toward each service during the period of 4/1/20-3/31/21.</i>	<i>Indicate in the rows below the amount of COVID Supplement 5 funds you used toward each service during the period of 4/1/20-3/31/21.</i>	<i>Indicate in the rows below the amount (IF ANY) of Part C (Caregiver) grant funds that you have used to provide services for Part A/B (Nutrition/Supportive) services during the period of 4/1/20-3/31/21. This type of flexibility is allowable due to the national Major Disaster Declaration (MDD).</i>	<i>Add up the amounts (if any) from the previous columns.</i>
Part A/B Staffing								\$
Part A/B: Nutrition	Congregate Meals							\$
	Home-Delivered Meals							\$
	Nutrition Education							\$
	Nutrition Counseling							\$
Part A/B: Supportive Services	Information/Assistance							\$
	Outreach							\$
	Case Management							\$
	Transportation							\$
	Homemaker							\$

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	Personal Care/Home Health Aid							\$
	Chore							\$
	Visiting							\$
	Telephone							\$
	Social Events							\$
	Health Promotion & Wellness							\$
	Visits to Persons in Nursing Facilities/Homes/Residential Care communities							\$
	Other Supportive Service: Consumable Items							\$
	Other Service: Lending Closet							\$
	Other Service:							\$
	Other Service:							\$
	Other Service:							\$
	Other Service:							\$
Part C: Caregiver Services	Part C Staffing							\$
	Information Services							\$

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	Information & Assistance							\$
	Counseling							\$
	Support Group							\$
	Training							\$
	Supplemental Services: Home Modification/Repairs							\$
	Supplemental Services: Consumable Items							\$
	Supplemental Services: Lending Closet							\$
	Supplemental Services: Other							\$
	Supplemental Services: Other							\$
	Supplemental Services: Other							\$
	Respite Care for Caregivers of Elders or Individuals of any age with Alzheimer's Disease and Related Disorders							\$

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	Respite Care for Elder Caregivers of Children Under the Age of 18							\$
	Respite Care for Elder Caregivers of Adults 18-59 Years Old with Disabilities							\$