Area Agency on Aging (AAA) Quarterly Report

| Fiscal year | Quarter | Months | AAA name | AAA director |
| :--- | :--- | :--- | :--- | :--- |

This report summarizes specific AAA activities.
This report is due to the appropriate OKDHS Aging Services Division (ASD) programs field representative no later than $\qquad$ -

Section I. ASD staff request for specific information.

Section II. AAA staff information or concerns pertinent to the Program Monitoring and Policy Development Unit.

Section III. Title III volunteer data for this quarter.

- Unduplicated number of volunteers, except Senior Corps and Ombudsman:
- Unduplicated number of volunteer hours, except Senior Corps and Ombudsman:

Section IV. Refer to the documentation on Form 02AG021E, Area Agency on Aging (AAA) Quarterly Report - A, to complete this section. Please follow the instructions below and complete the table on the next page. List each service identified as significantly above or below its $\qquad$ quarter goal.

- Column 1: List service.
- Columns 2 through 3: Place an $X$ in the appropriate column.
- Columns 4 through 5: Place an $X$ showing if the $\qquad$ quarter is above or below its projected $\qquad$ quarter goal.
- Column 6: Justification for service determined above or below the $\qquad$ quarter goal.
- Column 7: Enter action plan for AAA follow-up.

| 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Service <br> category | UoS | UPS | $+15 \%$ | $-15 \%$ | Justification, <br> be specific | Follow-up by AAA, <br> be specific |
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