



South Carolina Lieutenant Governor - Office on Aging Services

Area Agency on Aging Multi-Program Contract Reimbursements
Agency Name: CareSouth Carolina, Inc. - Vantage Point
Document Number: R7 MG-15
Vendor Number: 7000026841

2015 Payment Request Form
07/1/2014 through 6/30/2015

Payment Request #: 5
YTD Expenses through: 10/31/14
Final Pmt? NO

Prepared by: Mark Smith

Functional Area	Grant Name	Source of Funds F=Federal S=State L=Local	(a)	(b)	(c)	(d)	(e)	(f)		(g)	(h)	(i)
			SFY 14-15 Total Grant Award	Less: FY14 Reimbursed	YTD FY15 Expenses 7/1/2014 through 10/31/14	Total of All Previous Requests	Amount FY15 Requested this Period	Federal (F) Required	Share Required	State (S) Share	Local (L) Share	Revised Award Balance (a) - (b) - (c)
4B10	SIIB13	III-B - Supportive Services Contracted-F/L/S (Auth in AIM)	\$49,401.00	\$8,383.00	\$41,018.00	\$41,018.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
	SIIB14	III-B - Supportive Services Contracted-F/L/S (Auth in AIM)	\$497,499.00	\$0.00	\$28,781.00	\$15,139.00	\$22,846.00	\$19,419.00	\$1,142.00	\$2,285.00	\$468,718.00	\$0.00
	SIIB13	III-B - Legal Services	\$4,041.00	\$909.00	\$3,132.00	\$2,347.00	\$785.00	\$667.00	\$39.00	\$79.00	\$0.00	\$0.00
	SIIB14	III-B - Legal Services	\$20,004.00	\$0.00	\$35.00	\$0.00	\$126.00	\$107.00	\$6.00	\$13.00	\$19,969.00	\$0.00
	IIIC113	III-C-1 - Group Dining - F/L/S	-\$1.00	\$0.00	-\$1.00	-\$1.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
	IIIC114	III-C-1 - Group Dining - F/L/S	\$348,619.00	\$0.00	\$81,500.00	\$60,011.00	\$21,490.00	\$18,267.00	\$1,075.00	\$2,149.00	\$267,119.00	\$0.00
	IIIC213	III-C-2 - Home Delivered Meals F/L/S	\$212,896.00	\$38,733.00	\$66,809.00	\$78,725.00	\$26,816.00	\$22,794.00	\$1,341.00	\$2,682.00	\$107,354.00	\$0.00
	IIIC214	III-C-2 - Home Delivered Meals F/L/S	\$408,811.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$408,811.00	\$0.00
	SIID13	III-D Evidence-Based Wellness Programs F/L/S	\$1,119.00	\$237.00	\$882.00	\$882.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
	SIID14	III-D Evidence-Based Wellness Programs F/L/S	\$30,691.00	\$0.00	\$10,965.00	\$5,759.00	\$2,530.00	\$2,151.00	\$127.00	\$253.00	\$19,726.00	\$0.00
	SIIE13	III-E Family Caregiver Services (Auth in AIM) - F	\$822.00	\$0.00	\$822.00	\$822.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
	SIIE14	III-E Family Caregiver Services (Auth in AIM) - F	\$123,410.00	\$0.00	\$84,896.00	\$89,324.00	\$5,572.00	\$5,572.00	\$0.00	\$0.00	\$28,514.00	\$0.00
	5B65	SNISP14 NSIP	\$166,318.00	\$0.00	\$87,596.00	\$64,969.00	\$22,627.00	\$20,364.00	\$0.00	\$0.00	\$78,722.00	\$0.00
	X2J11	10010000 HCBS-State	\$1,231,476.00	\$91,270.00	\$203,789.00	\$145,619.00	\$58,170.00	\$52,353.00	\$5,817.00	\$936,417.00	\$0.00	\$0.00
	3B90	31270000 ACE - Bingo - Other	\$86,062.22	\$4,248.00	\$21,160.00	\$15,356.00	\$5,804.00	\$5,224.00	\$580.00	\$60,654.22	\$0.00	\$0.00
	2B84	10010000 Repsite State - Nonrecurring FY14	\$201,747.00	\$2,992.00	\$74,101.00	\$37,742.00	\$36,360.00	\$0.00	\$0.00	\$124,654.00	\$0.00	\$0.00
	10010000 Repsite State - Nonrecurring FY15	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
3B84	30350000 Alzheimer's Association - Repsite	\$90,151.00	\$8,092.00	\$7,718.00	\$5,281.00	\$2,437.00	\$0.00	\$2,437.00	\$74,341.00	\$0.00	\$0.00	
	TOTALS SFY 2015 (FFY14)	\$3,473,066.22	\$154,864.00	\$723,203.00	\$562,993.00	\$205,563.00	\$89,341.00	\$100,104.00	\$16,121.00	\$2,594,999.22	\$0.00	\$0.00

Phone: 843.383.8632

Under the penalties for perjury under State Law, I certify that this report is accurate and complete to the best of my knowledge and belief. It requests reimbursement only for the period covered by this payment request and only for contractors that have electronically replicated data with all information required by the LGOA.

Signature: Mark Smith Date: 11/18/14

Signature: Executive Director Date: 11/18/14