

[Fill Survey](#)[Profile](#)[Past Reports](#)[Upload File](#)[VIEW/PRINT DATA](#)

Welcome 9931343

[Sign out](#)

Toll Free Customer Service: 1-877-439-2572

[How to file Online?](#)**CONFIRMATION FOR CONTROL NUMBER: 9931343**

You have successfully completed 2019 EE04 Report for Control Number 9931343 on 9/23/19 1:28 PM. Your confirmation number is E609055798AU. Please print the copy for your records.

To complete additional functions please click "Back to Survey". When all functions are complete select "Click here to certify data".

Link opens in PDF. You must have Adobe Acrobat Reader version 5.0 or higher installed on your PC in order to download and print. If you do not have Adobe Acrobat Reader version 5.0 or higher, click here to download a copy from Adobe's web site.

*Please click [PRINT ALL] to PRINT or VIEW ALL functions DATA in PDF.*

OR

*Please click on below function type links to PRINT or VIEW individual functions DATA in PDF.*

Function	Status	Completed/ Updated Date
[15 : OTHER]	Completed	2019-09-23

[• BACK TO SURVEY](#)[• CLICK HERE TO CERTIFY DATA](#)[To view historical reports Click Here](#)



EEO4@eeocsurvey.com  
Phone: 1-877-439-2572  
Fax: 1-866-262-0032

U.S. Equal Employment Opportunity Commission  
EEO-4 Reporting Center  
P. O. BOX 8127 Reston VA 20195

**EQUAL EMPLOYMENT OPPORTUNITY COMMISSION  
STATE AND LOCAL GOVERNMENT INFORMATION (EEO4)**

**APPROVED**  
BY  
OMB  
30460008

EXCLUDE SCHOOL SYSTEMS AND EDUCATIONAL INSTITUTIONS

EXPIRES  
12/31/2005

(Read attached instructions prior to completing this form)

DO NOT ALTER INFORMATION PRINTED IN THIS BOX

MAIL COMPLETED  
FORM TO:

CONTROL NUMBER : 9931343

Survey Year : 19

EEO-4 Reporting Center  
PO Box 8127  
Reston VA 20195

**A. TYPE OF GOVERNMENT (Check one box only)**

- ☒ 1. State      ☐ 2. County      ☐ 3. City      ☐ 4. Township      ☐ 5. Special District
- ☐ 6. Other (Specify)

**B. IDENTIFICATION**

1. NAME OF POLITICAL JURISDICTION (If same as label, skip to Item C)

Nineteenth Judicial District Attorney

2. Address/Number and Street	CITY/TOWN	COUNTY	STATE/ZIP	EEOC USE ONLY A B
222 St. Louis Street	Baton Rouge	East Baton Rouge Parish	LA-70802	

**C. FUNCTION**

(Check one box to indicate the function(s) for which this form is being submitted. Data should be reported for all departments and agencies in your government covered by the function(s) indicated. If you cannot supply the data for every agency within the function(s) attach a list showing name and address of agencies whose data are not included )

<input type="checkbox"/>	<b>SUMMARY FUNCTION</b>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	1. Financial Administration. Tax billing and collection, budgeting, purchasing, central accounting and similar financial administration carried on by a treasurer's, auditor's or comptroller's office and	<input type="checkbox"/>	8. HEALTH. Provision of public health services, outpatient clinics, visiting nurses, food and sanitary inspections, mental health, alcohol rehabilitation service, etc.
<input type="checkbox"/>	GENERAL CONTROL. Duties usually performed by boards of supervisors or commissioners, central administration offices and agencies, central personnel or planning agencies, all judicial offices and employees (judges, magistrates, bailiffs, etc.)	<input type="checkbox"/>	9. HOUSING. Code enforcement, low rent public housing, fair housing ordinance enforcement, housing for elderly, housing rehabilitation, rent control
<input type="checkbox"/>	2. STREETS AND HIGHWAYS. Maintenance, repair, construction and administration of streets, alleys, sidewalks, roads, highways and bridges	<input type="checkbox"/>	10. COMMUNITY DEVELOPMENT. Planning, zoning, land development, open space, beautification, preservation
<input type="checkbox"/>	3. PUBLIC WELFARE. Maintenance of homes and other institutions for the needy administration of public assistance. (Hospitals and sanatoriums should be reported as item 7)	<input type="checkbox"/>	11. CORRECTIONS. Jails, reformatories, detention homes, halfway houses, prisons, parole and probation activities
<input type="checkbox"/>	4. POLICE PROTECTION. Duties of a police department sheriff's, constable's, coroner's office, etc., including technical and clerical employees engaged in police activities	<input type="checkbox"/>	12. UTILITIES AND TRANSPORTATION. Includes water supply, electric power, transit, gas, airports, water transportation and terminals.
<input type="checkbox"/>	5. FIRE PROTECTION. Duties of the uniformed fire force and clerical employees. (Report any forest fire protection activities as item 6.)	<input type="checkbox"/>	13. SANITATION AND SEWAGE. Street cleaning, garbage and refuse collection and disposal. Provision, maintenance and operation of sanitary and storm sewer systems and sewage disposal plants
<input type="checkbox"/>	6. NATURAL RESOURCES. Agriculture, forestry, forest fire protection, irrigation drainage, flood control, etc., and PARKS AND RECREATION. Provision, maintenance and operation of parks, playgrounds, swimming pools, auditoriums, museums, marinas, zoos, etc.	<input type="checkbox"/>	14. EMPLOYMENT SECURITY STATE GOVERNMENTS ONLY
<input type="checkbox"/>	7. HOSPITALS AND SANATORIUMS. Operation and maintenance of institutions for inpatient medical care	<input checked="" type="checkbox"/>	15. OTHER (Specify on Page Four)



**D. EMPLOYMENT DATA AS OF JUNE 30**

FUNCTION TYPE 15

**1. FULL-TIME EMPLOYEES (temporary employees are not included)**

JOB CATEGORIES	ANNUAL SALARY (in thousands 000)	RACE/ETHNICITY													TOTALS (COLUMN S-A-N)	
		NON-HISPANIC OR LATINO														
		MALE						FEMALE								
		HISPANIC OR LATINO	MALE A	FEMALE B	WHITE C	BLACK OR AFRICAN AMERICAN D	ASIAN E	NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER F	AMERICAN INDIAN OR ALASKAN NATIVE G	TWO OR MORE RACES H	WHITE I	BLACK OR AFRICAN AMERICAN J	ASIAN K	NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER L		AMERICAN INDIAN OR ALASKAN NATIVE M
49 \$0.1-15.9	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
50 16.0-19.9	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
51 20.0-24.9	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
52 25.0-32.9	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
53 33.0-42.9	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
54 43.0-54.9	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
55 55.0-69.9	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
56 70.0 Plus	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
57 \$0.1-15.9	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
58 16.0-19.9	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
59 20.0-24.9	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
60 25.0-32.9	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
61 33.0-42.9	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
62 43.0-54.9	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
63 55.0-69.9	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
64 70.0 Plus	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
65 TOTAL FULL TIME (line 1-64)	1	4	26	8	0	0	0	0	2	59	37	1	0	0	0	138
2. OTHER THAN FULLTIME EMPLOYEES (Including temporary employees)																
66 OFFICIALS/ADMIN	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
67 PROFESSIONALS	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
68 TECHNICIANS	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
69 PROTECTIVE SERVICE	0	0	3	0	0	0	0	0	0	0	0	0	0	0	0	3
70 PARA-PROFESSIONAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
71 ADMIN SUPPORT	0	0	0	1	0	0	0	0	0	3	0	0	0	0	0	4
72 SKILLED CRAFT	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
73 SERVICE/MAINTENANCE	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
74 TOTAL OTHER THAN FULL TIME (lines 66-73)	0	0	3	2	0	0	0	0	0	3	0	0	0	0	0	8
3. NEW HIRES DURING FISCAL YEAR Permanent full time only JULY 1 - JUNE 30																
75 OFFICIALS/ADMIN	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
76 PROFESSIONALS	0	0	0	1	0	0	0	0	0	1	0	0	0	0	0	2
77 TECHNICIANS	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
78 PROTECTIVE SERVICE	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
79 PARA-PROFESSIONAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
80 ADMIN SUPPORT	0	0	0	0	0	0	0	0	0	2	0	0	0	0	0	2
81 SKILLED CRAFT	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
82 SERVICE/MAINTENANCE	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
83 TOTAL NEW HIRES (lines 75-82)	0	0	0	1	0	0	0	0	0	3	0	0	0	0	0	4

REMARKS (List National Crime Information Center (NCIC) number assigned to any Criminal Justice Agencies whose data are included in this report)

\*\*\*LIST AGENCIES INCLUDED ON THIS FORM\*\*\*

Description of Agency	Description of Agency	Description of Agency	Description of Agency	Description of Agency	
<input type="checkbox"/> Ambulance	<input type="checkbox"/>	<input type="checkbox"/> Dog Control	<input type="checkbox"/> Library	<input type="checkbox"/> Outstation	<input type="checkbox"/> Vehicle Maintenance
<input type="checkbox"/> Animal Control	<input type="checkbox"/>	<input type="checkbox"/> Emergency Services	<input type="checkbox"/> Liquor Commission	<input type="checkbox"/> Parking Service	<input type="checkbox"/> Veteran Services
<input type="checkbox"/> Cemetery	<input type="checkbox"/>	<input type="checkbox"/> Manpower	<input type="checkbox"/> Paramedics	<input type="checkbox"/> Warehouse Inspector	<input type="checkbox"/> Youth Bureau
<input type="checkbox"/> CETA	<input type="checkbox"/>	<input type="checkbox"/> Human Resources	<input type="checkbox"/> Mechanical Maintenance	<input type="checkbox"/> School for the Retarded	<input type="checkbox"/> WIN
<input type="checkbox"/> Civil Defense	<input type="checkbox"/>	<input type="checkbox"/> Human Services	<input type="checkbox"/> Motor Pool	<input type="checkbox"/> Shop	
<input type="checkbox"/> OTHER:					

CERTIFICATION: I certify that the information given in this report is correct and true to the best of my knowledge and was reported in accordance with accompanying instructions. (Willfully false statements on this report are punishable by law, US Code, Title 18, Section 1001.)

NAME OF PERSON TO CONTACT REGARDING THIS FORM		TITLE	
Laurie Englade		Human Resources Mgr	
ADDRESS (Number and Street, City, State, Zip Code)		TELEPHONE NUMBER	Ext
222 St. Louis Street, 5th Floor, Baton Rouge, LA 70802.		225-389-8607	
DATE	EMAIL	TYPED NAME/TITLE OF AUTHORIZED OFFICIAL	SIGNATURE
2019-09-23	laurie.englade@ebrda.org	Laurie Englade HR Mgr	<input checked="" type="checkbox"/>