INDEPENDENCE MENTAL HEALTH INSTITUTE
NON-PROFIT REPORT
MARCH 2013
FY 13

DATE	REF #	FND	SOURCE	PURPOSE	DEPOSITS	WITHDR.
				BEGINNING BALANCE	$19,730.55	
03/01/13	9762	WDR	WARD STAFF	PATIENT'S USE	$2.05	$0.00
03/05/13	101957	SFV	NEJEWISH BIBBS	SOCIAL PARTY	$0.00	$20.00
03/05/13	101958	UPF	CAPITOL VENDING	ACTIVITIES	$0.00	$26.70
03/06/13	101959	UPF	CAPITOL VENDING	SOCIAL PARTY	$0.00	$25.00
03/08/13	9763	UPF	JEAN LIVINGSTON	PATIENT'S USE	$30.00	$0.00
03/15/13	9764	UPF	AM. LEG. & AM. LEG. AUX., AURORA	PATIENT'S USE	$50.00	$0.00
03/15/13	9765	WDR	WARD STAFF	PATIENT'S USE	$3.80	$0.00
03/18/13	9766	UPF	ANONYMOUS	PATIENT'S USE	$20.00	$0.00
03/18/13	101960	ALG	WAL-MART COMMUNITY	HOMEMAKING AREA	$0.00	$70.78
03/18/13	101960	UPF	WAL-MART COMMUNITY	HOMEMAKING AREA	$0.00	$18.44
03/28/13	101961	UPF	CAPITOL VENDING	CANTEEN BOOK	$0.00	$10.00
03/28/13	101963	UPF	CAPITOL VENDING	CANTEEN BOOK	$0.00	$10.00
					$105.95	$177.92
				ENDING BALANCE		$19,658.58

Monthly Volunteer Report for: Independence Mental Health Institute, Independence, Iowa 50644

For month of: March

2013

1. # of individuals registered as DHS Volunteers	69
2. # of Groups registered as DHS Volunteer Groups	7

use this from for monthly reporting

submit report monthly (by end of following month)

to Iowa Ethics and Campaign Disclosure Board

Fax number 515-281-4073

	3. Total # Volunteers Active This Month	4. Total # Hours Active This Month	5. Cumulative Hours to Date	6. # Clients Served – Adults 18 to 59	7. # Clients Served – Adults 60 or older	8. # Clients Served – Children 0 to 17*
a. Individual Volunteers - providing direct Service to clients/residents	2	2	38			
b. Individual Volunteers – providing indirect Service, i.e., clerical assistance, etc.	1	18	214			
c. Individuals in Groups Direct Service to clients/residents	0	0	4			
d. Individuals in Groups Indirect Service i.e., clerical assistance, etc.	1	2	23			
e. Stipend Volunteers (i.e., Foster Grandparents, Promise Jobs, Green Thumb, etc.)	13	39	379			
TOTAL	17	61	658	28	5	22

* new federal reporting requirement

Report completed by: Diane Wessels

Created 4/15/2013

Apr-16-2013 10:33 AM Mental Health Institute 13193345205

CONTRIBUTIONS REPORT

Institution/Bureau Independence Mental Health Institute

Region _____ County Buchanan

March 16, 2013
Month/Year

Name of person completing report Linda Byers . Title Accounting Clerk II

Date	CONTRIBUTOR (Name & Address if Available)	Contribution	$ Value	Check type Cash	In-Kind	Purpose – If Specified
	See itemized sheet for Cash listings.					

Total value of this page: $0.00

Total value of pages 1 thru 2: $105.95