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

For month of: **August** **2015**

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

1. # of individuals registered as DHS Volunteers	49
2. # of Groups registered as DHS Volunteer Groups	7

	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	0	0	0			
b. Individual Volunteers – providing Indirect Service, i.e., clerical assistance, etc.	1	15	35			
c. Individuals in Groups Direct Service to clients/residents	2	8	18			
d. Individuals in Groups Indirect Service i.e., clerical assistance, etc.	1	2	4			
e. Stipend Volunteers (i.e., Foster Grandparents, Promise Jobs, Green Thumb, etc.)	14	45	95			
TOTAL	18	70	152	34	8	19

* new federal reporting requirement

Report completed by: Diane Wessels

2015 SEP 11 AM 8:40

Created 09/11/2015

DATE	REF #	FND	SOURCE	PURPOSE	DEPOSITS	WITHDR.
				BEGINNING BALANCE	$20,091.60	
08/03/2015	7153	SFV	Capitol Vending	pt.'s use-'fun day'		$15.00
08/05/2015	7156	UPF	Capitol Vending	pt.'s use-social party		$15.00
08/05/2015	7155	SFV	Nejewish Bibbs	pt.'s use-social party		$20.00
08/07/2015	6900	WD R	Ward staff	pt.'s use	$3.10	
08/17/2015	7157	UPF	Capitol Vending	pt.'s use-canteen book		$5.00
08/20/2015	6903	WD R	Ward staff	pt.'s use	$5.50	
08/24/2015	7159	WSF	Hawkeye Comm. Coll.	empl. CEU's		$455.00
08/31/2015	7161	SFV	Capitol Vending	pt.'s use-'fun day'		$23.00
08/31/2015	7162	FDF	Kirkwood Comm. Coll.	empl. CEU's		$95.00
					$8.60	$628.00
				ENDING BALANCE		$19,472.20

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CONTRIBUTIONS REPORT

Institution/Bureau Independence Mental Health Institute

Region _____ County Buchanan

August 2015
Month/Year

Name of person completing report Val Stanford Title Accounting Clerk II

Date	CONTRIBUTOR (Name & Address if Available)	Contribution	$ Value	Check type Cash	In-Kind	Purpose – If Specified

Total value of this page: $0

Total value of pages 1 thru 2: $8.60

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