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

For month of : **June**

use this from for monthly reporting

	2016
1. # of Individuals registered as DHS Volunteers	49
2. # of Groups registered as DHS Volunteer Groups	7

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	0	0	0			
b. Individual Volunteers – providing Indirect Service, i.e., clerical assistance, etc.	1	20	255			
c. Individuals in Groups Direct Service to clients/residents	3	12	82			
d. Individuals in Groups Indirect Service i.e., clerical assistance, etc.	0	0	9			
e. Stipend Volunteers (i.e., Foster Grandparents, Promise Jobs, Green Thumb, etc.)	13	20	397			
TOTAL	17	52	743	45	7	18

* new federal reporting requirement

Report completed by: Diane Wessels

Created 07/13/2016

07/06/2016 MONTHLY DONATION REPORT FY '16

DATE	REF #	FND	SOURCE	PURPOSE	DEPOSITS	WITHDR.
				Beginning Balance	**$39,170.43**	
06/06/2016	7019	WD R	ward staff	pt use	$3.85	
06/08/2016	7225	UPF	Capitol vending	pt birthday		$6.00
06/20/2016	7021	CCU g/s	Funding Factory	rebate-school ink cartridges	$24.20	
06/21/2016	7022	WD R	ward staff	pt use	$4.15	
06/22/2016	7023	MPCL rec	MtPl.inherit.acct	pt use	$4,364.23	
06/22/2016	7024	MPCL rec	MtPl.mem.fund	pt use	$1,168.47	
06/29/2016	7226	UPF	Capitol vending	pt canteen		$10.00
06/29/2016	7025	WD R	ward staff	pt use	$2.80	
06/30/2016	7026	FDF	Buch.Cty Ia	DAEC training reimb.	$2,000.00	
				TOTALS	$7,565.30	$15.00

CONTRIBUTIONS REPORT

Institution/Bureau Independence Mental Health Institute

Region _____ County Buchanan

June 2016
Month/Year

Name of person completing report Val Stanford Title Accounting Clerk II

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

Total value of this page: $0.00

Total value of pages 1 thru 2: $7565.30