

2.

# COUNTY OF SAN DIEGO VOLUNTEER REPORT FORM PERIOD JULY 1, 2019 - JUNE 30, 2020

Deadline: July 17, 2020

1.	DEPAI	RTME	NT IN	FORM	IATION:
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Department:	Office of County Counsel
Division/Unit:	
a. GENERAL VO	OGRAM BENEFITS:  DLUNTEERS (this section should include community volunteer, student
	os, corporations, etc.)
No. of Voluntee	rs: 2 Hours: 1,080 x \$29.95 = \$32,346
	performed by GENERAL VOLUNTEERS in this category: esearch, drafting simple legal documents.
b. INSTITUTION PIC/RETC, G.	
1101 01 1010	,
Types of work N/A	performed by INSTITUTIONAL VOLUNTEERS in this category:



Deadline: July 17, 2020

positions requiri sports figure or	LUNTEERS (this section in the specific skills and/content in the specific skills and/content in the specific such a volunteer, place in the specific such a volunteer, place in the specific specific such a volunteer, place in the specific	or expertise ialized posit	levels ions h	, for exa nave veri	mple, an a ifiable con	attorney, physician npensation levels
Position		Hours	х	VCL	E	Dollar Benefit
N/A		N/A	_	N/A		0.00
			_			
=		0	_ =			
		-	_ =			
No. of Volunteers: N	/A Total Hours:	N/A T	otal V	alue	= \$0.00	
No. or volunteers. IN	/A Total Hours.	14/7	Otal v	aluc.	- 50.00	
Tunos of work north	man and have CDECIALIZED	VOLLINITEE	)C : +	L:		
N/A	rmed by SPECIALIZED	VOLUNIEER	72 III C	nis categ	gory:	
,						
d. TOTALS OF DEPA	ARTMENT VOLUNTEER	S (from abo	ve):			
		•				- II - C
2a.	No. of Volunteers 2		Hou			Dollar Benefit
2a. 2b.	N/A		1,0			\$32,346 0.00
2c.	N/A		N/A			0.00
:				=======================================		
Total	2	Total	10	080	Total	\$32,346
Volunteers		Hours			Value	



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# 3. DONATIONS TO VOLUNTEER PROGRAM:

Please l	list all donatio	ns to the department	's Volunteer Program incl	uding monetary donations and
tangıble fair ma	e/intangible it rket value to e	ems. Items such as co each and add to the to	omputers, air time, transpotal value of the donation:	ortation, books, etc. Please assign a s section.
Item [	Donated:		Value:	
Item [	Donated:		Value:	
Item [	Donated:		Value:	-
Item [	Donated:		Value:	
Item [	Donated:		Value:	
			Total Value:	\$0.00
4.	VOLUNTEER	R PROGRAM COSTS:	:	
			olunteers (total hours of c ervising program voluntee	lirect supervision times hourly rate rs.
	Hours:80	x	Rate: \$79.06	= \$6,324.80
	coordina	tor(s)). This section s	(total hours of program c should include coordination teer placements and reco	oordination times hourly rate of on of staff, compiling statistics, job ognition, etc.
	Hours: 5	х	Rate:\$37.54	= \$187.70
	c. Other pr <u>Item</u> N/A	ogram costs (volunte	er training materials/supp	olies, recognition costs, etc.):  Cost N/A
	TOTAL OF O	THER PROGRAM COS	TS	\$0.00



Deadline: July 17, 2020

d.	TOTAL OF VOLUNTEER PROGRAM COST	\$6,512.50
	(Sum of 4a, 4b and 4c)	

#### 5. NET BENEFIT TO DEPARTMENT FROM VOLUNTEER PROGRAM:

a.	Total Dollar Benefits of Volunteers, Item 2d (Page 2)	\$32,	346.00
b.	Total of Donations to Volunteer Program, Item 3 (Page 2)	\$	0.00
c.	Subtract Total of Volunteer Program Costs, Item 4d (Page 3)	\$ 6,	512.50

**TOTAL PROGRAM BENEFIT** 

\$25,833.50

#### 6. RECRUITING:

Please describe your recruiting programs:

Volunteers usually establish direct contact with us first volunteers and current and former employees. Some with us. Some volunteers contact us to gain employments	interns receive course credit for volunteering

## 7. SPECIAL VOLUNTEER PROGRAM ACTIVITIES/ACHIEVEMENTS:

Please describe any special activities and/or achievements your program was involved in during the period of this report:

N/A	



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# 8. VOLUNTEER PROGRAM GOALS FOR FISCAL YEAR 2019-20:

Please describe your program goals. Include activities, number of volunteers, recruitment, training, recognition and other goals:

No set goals at this time. basis.	We will continue to utilize la	aw school interns on a needs	s and space available

#### 9. GENERAL INFORMATION:

Name of I	Person C	Completing Report: Nancy Lahti	19	1534	.,
Phone Nu	ımber:	619 531-4859		Mail Stop:	A-12
Email:	Nancy.	lahti@sdcounty.ca.gov			· ·

Volunteer	Coordir	nator:	Nancy Lahti		
Phone Nu	mber:	619 531	-4859	Mail Stop:	A-12
Email:	Nancy.	lahti@sd	county.ca.gov		

#### 10. DEPARTMENT CERTIFICATION:

DEPARTMENT HEAD SIGNATURE

DATE