



**COUNTY OF SAN DIEGO  
VOLUNTEER REPORT FORM  
PERIOD JULY 1, 2021 - JUNE 30, 2022  
Deadline: July 15, 2022**

**1. DEPARTMENT INFORMATION:**

Department: Department of General Services  
Division/Unit: Asset Management and Facilities Support

**2. VOLUNTEER PROGRAM BENEFITS:**

a. GENERAL VOLUNTEERS (this section should include community volunteer, student intern, groups, corporations, etc).

No. of Vol.	2 Hours	1000	X	\$35.56	=	\$35,560.00
-------------	---------	------	---	---------	---	-------------

Types of work performed by GENERAL VOLUNTEERS in this category:

The Volunteer assigned to support the Asset Management Division is an invaluable resource in that Mr. Ring participates in updating property inventory spreadsheets for the Department of General Services. Mr. Ring work with staff in the preparation of map documents, quality control and conducts research queries. (vol hours: 640)

Mr. Carrasco is volunteering his support to the Facilities Operations Division in Contracts. Mr. Carrasco performs standardized contract administration, inspection, monitoring, and compliance work for County facilities, buildings, and grounds. (vol hours: 360)

b. INSTITUTIONAL VOLUNTEERS (this section should include honor camp inmates, PIC/RETC, GAIN, etc.)

No. of Vol.	Hours		X	\$35.56	=	\$0.00
-------------	-------	--	---	---------	---	--------

Types of work performed by INSTITUTIONAL VOLUNTEERS in this category:

c. SPECIALIZED VOLUNTEERS (this section should include utilization of Special Volunteers in positions requiring specific skills and/or expertise levels, for example, an attorney, physician, sports figure or celebrity). These specialized positions have verifiable compensation levels (VCL). If you have such a volunteer, please indicate the position, hours and compensation level

<u>Position</u>	<u>Hours</u>	X	<u>VCL</u>	=	<u>Dollar Benefit</u>
_____	_____		_____		\$0.00
_____	_____		_____		\$0.00
_____	_____		_____		\$0.00
_____	_____		_____		\$0.00
_____	_____		_____		\$0.00
<b>No. of Vol.</b>		<b>Total Hours</b>	<b>0</b>	<b>Total Value =</b>	<b>\$0.00</b>

Types of work performed by SPECIALIZED VOLUNTEERS in this category:

d. TOTALS OF DEPARTMENT VOLUNTEERS (from above):

	<u>No. of Volunteers</u>	<u>Hours</u>	<u>Dollar Benefit</u>
2a.	2	1000	\$35,560.00
2b.	0	0	\$0.00
2c.	0	0	\$0.00
<b>Total Vol.</b>	<b>2 Hours</b>	<b>1,000</b>	<b>Total Value = \$35,560.00</b>

**3. DONATIONS TO VOLUNTEER PROGRAM:**

Please list all donations to the department's Volunteer program including monetary donations and tangible/intangible items. Items such as computers, air time, transportation, books, etc. Please assign a fair market value to each and add to the total value of the donations section.

Item Donated:	_____	Value:	_____
Item Donated:	_____	Value:	_____
Item Donated:	_____	Value:	_____
Item Donated:	_____	Value:	_____
Item Donated:	_____	Value:	_____

TOTAL VALUE = \$0.00

**4. VOLUNTEER PROGRAM COSTS:**

a. Cost of supervision of volunteers (total hours of direct supervision multiplied by the hourly rate of staff person (s) directly supervising program volunteers.)

Hours  X Rate  = \$0.00

b. Cost of program coordination (total hours of program coordination multiplied the hourly rate of coordinator(s)). This section should include coordination of staff, compiling statistics, job description preparation, volunteer placement, recognition, etc.)

Hours  X Rate  = \$0.00

c. Other program costs (volunteer training materials/supplies, recognition costs, etc.):

<u>Item</u>	<u>Cost</u>
_____	_____
_____	_____
_____	_____
_____	_____

TOTAL OF OTHER PROGRAM COSTS = \$0.00

d. TOTAL OF VOLUNTEER PROGRAM COST = \$0.00  
(add 4a, 4b, and 4c)

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

a. Total Dollar Benefits of Volunteers, Item 2d (Page 2)	<u>\$35,560.00</u>
b. Total of Donations to Volunteer Program, Item 3 (Page 2)	<u>\$0.00</u>
c. Subtract Total of Program Costs, Item 4d (Page 3)	<u>\$0.00</u>

**TOTAL PROGRAM BENEFIT**

<b>\$35,560.00</b>
--------------------

**6. RECRUITING:**

Please describe your recruiting programs:

**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:

**8. VOLUNTEER PROGRAM GOALS FOR FISCAL YEAR 2021-22:**

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

**9. GENERAL INFORMATION:**

Name of person completing report: Danita Arrizon  
Phone: (619) 985-6817 Mail Stop: 0-361 E-Mail: [Danita.Arrizon@sdcount](mailto:Danita.Arrizon@sdcount)  
Volunteer Coordinator: Danita Arrizon  
Phone: Same Mail Stop: Same E-Mail: \_\_\_\_\_

**10. DEPARTMENT CERTIFICATION:**

\_\_\_\_\_  
**DEPARTMENT HEAD SIGNATURE**