



**COUNTY OF SAN DIEGO
VOLUNTEER REPORT FORM
PERIOD JULY 1, 2024 - JUNE 30, 2025
Deadline: August 8, 2025**

1. DEPARTMENT INFORMATION:

Department: Planning & Development Services
Division/Unit: A6710

2. VOLUNTEER PROGRAM BENEFITS:

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

No. of Vol.		Hours		X	\$40.14	=	\$0.00
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Types of work performed by GENERAL VOLUNTEERS in this category:

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

No. of Vol.		Hours		X	\$40.14	=	\$0.00
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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>
294 - (Planning & Sponsor Groups)	7,056		\$94.00		\$663,264
					\$0
					\$0
					\$0
No. of Vol. Total Hours 7,056 Total Value =					\$663,264

Types of work performed by SPECIALIZED VOLUNTEERS in this category:
CPSG members act in an advisory capacity to the Director of Planning & Development Services, the Zoning Administrator, the Planning Commission, the Board of Supervisors, and others involved in the County land development process.

Policy I-1 - Policy & Procedures for CPSGs

d. TOTALS OF DEPARTMENT VOLUNTEERS (from above):

<u>No. of Volunteers</u>	<u>Hours</u>	<u>Dollar Benefit</u>
2a. 0	0	\$0.00
2b. 0	0	\$0.00
2c. 294	7,056	\$663,264
Total Vol. 294 Hours 7,056 Total Value =		\$663,264

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
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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	<input type="text" value=""/>	X	Rate	<input type="text" value=""/>	=	<input type="text" value="\$0.00"/>
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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	<input type="text" value="2080"/>	X	Rate	<input type="text" value="\$73.76"/>	=	<input type="text" value="\$153,421"/>
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c. Other program costs (volunteer training materials/supplies, recognition costs, etc.):

<u>Item</u>	<u>Cost</u>
Office Expense - (Including but not limited to Legal Ads, PO Boxes, Facility Rentals)	<input type="text" value="\$35,690"/>
_____	_____
_____	_____
_____	_____
_____	_____

TOTAL OF OTHER PROGRAM COSTS	=	<input type="text" value="\$35,690"/>
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d. TOTAL OF VOLUNTEER PROGRAM COST (add 4a, 4b, and 4c)	=	<input type="text" value="\$189,111"/>
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5. NET BENEFIT TO DEPARTMENT FROM VOLUNTEER PROGRAM:

a. Total Dollar Benefits of Volunteers, Item 2d (Page 2)	<input type="text" value="\$663,264"/>
b. Total of Donations to Volunteer Program, Item 3 (Page 2)	<input type="text" value="\$0"/>

c. Subtract Total of Program Costs, Item 4d (Page 3)

\$189,111

TOTAL PROGRAM BENEFIT

\$474,153

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 2024-25:

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

9. GENERAL INFORMATION:

Name of person completing report:	<u>Samuel Murray</u>		
Phone: <u>(619) 787-5885</u>	Mail Stop: <u>0-650</u>	E-Mail:	<u>Samuel.Murray@sdcounty.ca.gov</u>
Volunteer Coordinator:	<u>Sheryleen Dungao</u>		
Phone: <u>(619)964-6194</u>	Mail Stop: <u>0-650</u>	E-Mail:	<u>Sheryleen.Dungao@sdcounty.ca.gov</u>

10. DEPARTMENT CERTIFICATION:

DEPARTMENT HEAD SIGNATURE

DATE