

Service Report		Name		From ___/___/___ To ___/___/___	
"IN KIND" GOODS AND SERVICES			SERVICE REPORT DEFINITIONS		
Goods	\$ Value	# Helped	In-Kind Goods and Services	In Items A through H include the estimated dollar value of the goods and/or services provided and the number of persons helped. These items may be provided as part of a home visit or during other visits or client contacts.	
A. Food					
B. Furniture					
C. Clothing					
D. Other			Visits and Services to People:		
Services			Item A. Home Visits	Visit to a person's home. If your team visits a family of four, count 1 visit and 4 people helped.	
E. Legal			Item B. Prison Visits	Number of visits and total number prisoners visited during the report time period.	
F. Medical					
G. Dental			Item C. Hospital Visits	A patient is visited at a hospital. (Two members visiting the same patient counts as one visit.)	
H. Other					
VISITS AND SERVICES TO PEOPLE			Item D. Aged/Daycare Visits	Occurs each time a visit is made to a nursing home, rest home, convalescent hospital or facility for the aged, e.g. retirement home, assisted living facility.	
Person-to-person visits	#	# Helped	Item E. Other In-Person Visits:	Any other personal visits to any other location. This includes client contacts, other than home visits as well as all interviews with the individual being served or their family outside the home.	
A. Home Visits					
B. Prison Visits			Item M. Total hours of service	All member hours spent in ANY activity relative to the Society. This includes all hours helping people, attending meetings, travel time, workshops, SVDP spiritual gatherings, etc.	
C. Hospital Visits					
D. Aged/Daycare Visits					
E. Other In-Person Visits			Item N. Miles driven	Estimated unreimbursed miles driven in ANY activity relative to the Society. This includes all miles driven assisting people, to and from meetings, workshops, SVDP spiritual gatherings, etc.	
Total Hours of Service					
Total Miles Driven					

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