

SOCIETY OF ST. VINCENT DE PAUL MINUTE SHEET

	neeting of the Conference, held onatAM / PM. Tom	The opening prayers w	vere said.		_rea
lection fro	om	on the subject of		The	
ious min	utes were read. Indicate amendments,	if any			
	VISITS AND SEI	RVICES TO PEOPLE	Obtain		
		eekly Worksheet (pag			
	Person-to-Person Visits	# of Visits	# of People Helped		
	A. Home Visits	W OI VIBIO	" of respie frespea		
	B. Prison/Returning Citizens Visits	5			
	C. Hospital Visits				
	D. Eldercare Visits				
	E. Other In-Person Visits				
	Subtotal (A thru E)				
	Zuztotui (I tiii u L)				
	(IN INDE GOODS	AND GERLY GEG BRO	. was no		
	"IN KIND" GOODS A	AND SERVICES PRO	<u>VIDED</u>		
		# of Times	\$ Value		1
	"In Kind" Services		,		
F.	Legal				
G.	Medical				
H.	Dental				
I. (Other				
Subtot	tal 1 (F thru I)		\$		
	"In Kind" Goods	# of Times	\$ Value		
J.]	Food				_
K.	Furniture				
	Clothing				
	. Other				
	tal 2 (J thru M)		\$		
	,				
	tal 2 (J thru M) (Subtotal 1 + Subtotal 2)		\$ \$		
	Tomas Brons r Hry pep (Tomas proc	Workstreet			
	TOTAL PEOPLE HELPED (TOTAL FROM COLUMN F)	W WUKKSHEEI			
	TOTAL HOURS OF SERVICE (TOTAL F	ROM WORKSHEET			
	COLUMN G)				
	ESTIMATED TOTAL OF UNREIMBURS (TOTAL FROM WORKSHEET COLUMN I				
	(TOTAL I ROM WORKSHEET COLUMN I	11)			
-	<u> </u>	()			
	Signature of Conference President	Phone	Date		



SOCIETY OF ST. VINCENT DE PAUL – WEEKLY MINUTE SHEET For Additional Conference Record Keeping

CONFERENCE ACTIVITIES

DATE:
Special Works (specify):
Reports on Special Projects and Programs: * Please remember to keep an updated International Twinning Partners Contact List to be submitted with your Conference Annual Report.
Assignments to Cases or Projects:
Communications – General SVdP news and reports:
New Business:
Bills authorized for payment:
14
2. 5. 3. 6.
Spiritual Advisor's Remarks:
At the close of business, a collection was taken up amounting to \$ Meeting closed with a prayer.
Secretary

WEEKLY WORKSHEET

Number of Services to People

(Members are to report on all cases in which contact was made.)

Client Id / Case #	Contacte d by: (Initials)	Home Visit (A)	Prison Visit (B)	Hospita 1 Visit (C)	Aged/ Day Care Visit (D)	Other Inperson Visit (E)	# People Helped (F)	Total Hrs. Service (G)	Est. Ttl Unreimb Miles (H)	Conf. Action
	\neg									
TOTALS									1	

Use totals on "Visits and Services to People" section – page 2