

Weekly Report

_____ - SVdP Conference

Week: _____

Vincentian: _____

Visits:

Visits	Number ¹	People Helped ²
Home		
Prison		
Hospital		
Eldercare		
Other in-Person		

In-Kind:

Services	Number ³	Value ⁴
Legal		
Medical		
Dental		
Other		

Goods	Number ³	Value ⁴
Food		
Furniture		
Clothing		
Other		

Other Service Data:

Hours (Member) ⁵	Hours (Non-Member) ⁶	Mileage (Member) ⁷

¹ The number of visits you made in each category for the time period

² The number of people impacted during the visits you made in each category

³ The number of times you provided an in-kind service or good in each category

⁴ The estimated value of the of the total amount of service or good provided in each category

⁵ The total number of hours spent by the Vincentian (Active or Associate) on St. Vincent de Paul activities

⁶ The total number of hours spent by non-Vincentians on St. Vincent de Paul activities

⁷ The total number of miles driven by the Vincentian for St. Vincent de Paul activities (meetings, visits)