

CHAPTER 110 VOLUNTEER PROGRAM ANNUAL REPORT

DEPARTMENT OF HEALTH Program/Facility:

ADDRESS, CITY, STATE & ZIP: _____

QUARTER:

FISCAL YEAR: ______(July 1 – June 30)

		Α	В	С	
TOTAL NUMBER OF INDIVIDUAL VOLUNTEERS	TOTAL NUMBER OF VOLUNTEER HOURS	VALUE OF NON-LICENSED VOLUNTEERS (\$21.36/hr)	VALUE OF LICENSED PROFESSIONAL VOLUNTEERS (**Varies)	VALUE OF DONATIONS	TOTAL VALUE OF SERVICES, AND DONATIONS (A+B+ C =)

** Value of Licensed Professional Service should be the standard fee for services charged for that professional category.

Physicians	\$250.00/hr at clinic	ARNP/PA	\$ 75.00/hr	Respiratory Therapist	s	\$ 4	40.00/hr
Dentists	\$200.00/hr	RN	\$ 35.00/hr	Pharmacists		\$	75.00/hr
Chiropractors	\$ 90.00/hr	LPN	\$ 25.00/hr	Clinical Social Worke	rs	\$ 3	50.00/hr
Optometrists	\$ 50.00/hr						
Dental Techni	icians, Medical Techni	cians, HIV Coui	nselors, Suppo	rt staff, etc.	\$ 21.79		

Rev 07/15/13

Exhibit K