



To be completed by Rotarians. Return this form to Pete and Helen Maxwell, 1305 Bounty Way, Laguna Beach, CA 92651

Rotary Club: Brea

Project Title: See, Hear, and Smile Health Clinic

Progress Report Final Report

Project Description

1. Briefly describe the project. What was done, when and where did project activities take place, and who were the beneficiaries?

It was a community health fair and dental clinic. 265 low income clients were seen and treated, having been screened by the Case Management team of the Family Resource Center of Brea. The event was held on Saturday, April 21 at the Brea Community Center, 695 E. Madison.

2. How many Rotarians participated in the project? 5

3. What did they do? Please give at least two examples.

We checked in the clients (beneficiaries) directed to to various services and assisted the other health vendors in setting up their booths. (Five {5} Interact students also helped)

4. How many non-Rotarians benefited from this project? 100

5. What are the expected long-term community impacts of the project?

Improved health and dental health for those uninsured clients.

6. If a cooperating organization was involved, what was its role?

Many health care vendors were present to assist clients with a variety of health care issues, i.e., hearing, eye exams, blood pressure and diabetes exams, etc.

Financial Report - Be sure that Income equals Expenditures!

7. Income	Amount
1. District Simplified Grant funds approved by the District	\$1,000
2. Club contribution	\$1,000.59
3. Other funding (specify)	
Total Project Income	2010.59

8. Expenditures - please be specific and add lines as needed - receipts must be attached	Amount
1. Plak Smaker – dental kits	\$487.05
2. Ink Link - Health Fair Banners	\$552.22
3. Brooks Larson, D.D.S. for Patterson Dental Supplies	\$971.32
4.	
5.	
6.	
Total Project Expenditures	2010.59

9. By signing this report, I confirm that to the best of my knowledge these District Simplified Grant funds were spent only for eligible items in accordance with Trustee-approved guidelines, and that all of the information contained herein is true and accurate.

Receipts for all grant-funded expenditures have been provided to the district. I also understand that all photographs submitted in connection with this report will become the property of RI and will not be returned. I warrant that I own all rights in the photographs, including copyright, and hereby grant RI and TRF a royalty free irrevocable license to use the photographs now or at any time in the future, throughout the world in any manner it so chooses and in any medium now known or later developed. This includes the right to modify the photograph(s) as necessary in RI's sole discretion. This also includes, without limitation, use on or in the web sites, magazines, brochures, pamphlets, exhibitions and any other promotional materials of RI and TRF.

Certifying Signature

David D. Rader

Date: May 24, 2012

Print name, Rotary title, and club

David D. Rader, Community Service Director