



SANCTUARY, INCORPORATED

"Helping Youth and Families Help Themselves" since 1971

Address: 406 Maimai Rd., Chalan Pago, Guam 96910

* Tel: 475-7101 * Fax: 477-3117 * Crisis Hotline: 475-7100

Website: www.sanctuaryguam.org * E-mail: inquiries@sanctuaryguam.org



July 24, 2014

Honorable Judith Won Pat
Speaker
32nd Guam Legislature
155 Hessler Place
Hagatna, GU 96910

32-14-1873
Office of the Speaker
Judith T. Won Pat
Date 7.28.14
Time 3:10 PM
Received By [Signature]

Hafa Adai Speaker Won Pat,

In compliance with Public Law 28-150, please find herein reports for all our programs which receive funding through a Government of Guam agency. Section 7 specifically states: All non-profit organizations funded by this Act shall maintain financial records that accurately account for appropriated funds and shall provide a budgetary breakdown by object category to the department or agency overseeing the appropriation. Sanctuary, Incorporated has existing contracts with the following Government of Guam agencies: Department of Labor, Department of Public Health and Social Services, Guam Behavioral Health and Wellness Center, Department of Youth Affairs, and the Office of the Attorney General. Submitted herewith are copies of the programmatic and financial reports that the agency submitted to the various entities for the period from April 1, 2014 through June 30, 2014.

Please note that the current law does not require non-profits to submit reports directly to the Legislature and Public Auditor. However, we are providing such for your information and records.

For additional information or further clarification, please do not hesitate to contact me via telephone at 475-7101.

2014 JUL 28 PM 3:21

Más Rikuetdo,

[Signature]
Mildred Q. Lujan
Executive Director



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July 24, 2014

Doris Flores Brooks
Public Auditor
238 Archbishop Flores St.
Pacific News Building, Suite 401
Hagatna, GU 96910

Hafa Adai Ms. Brooks,

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Más Rikuetdo,


Mildred Q. Lujan
Executive Director

Attachment 1

Sanctuary, Incorporated of Guam

AmeriCorps Program

Reporting Agency

Department of Labor

Serve Guam! Commission

Reports

1. Quarterly financial expenditures and obligation
2. Program progress report



Sanctuary, Incorporated of Guam

A Non-profit Organization Established in 1971

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Crisis Hotline (671)475-7100 • Fax (671)477-3117 • Email: inquiries@sanctuaryguam.org
www.sanctuaryguam.org

CONF

July 08, 2014

RECEIVED

Ms. Doris M. Aguon
Executive Director
Serve Guam! Commission
Guam Capital Investment Corporation
414 West Soledad Avenue
Hagatña, Guam 96932

Dear Ms. Aguon:

Attached for your review is the 2nd Quarter Federal Financial Report for Sanctuary, Incorporated AmeriCorps Program for quarter ending June 30, 2014 for Grant Year 2013-2014.

Should you have any questions or comments, please feel free to contact me at 475-7101, fax me at 477-3117, or email at o.j.taitano@sanctuaryguam.org.

Sincerely,

OJ Taitano
Executive Director, Acting
Sanctuary, Incorporated

FEDERAL FINANCIAL REPORT

(Follow form instructions)

1. Federal Agency and Organizational Element
 Which Report is Submitted: Corporation for National and Community Service

2. Federal Grant or Other Identifying Number Assigned by Federal Agency: 10AC120075

Page 1 of 1 pages

Recipient Organization (Name and complete address including Zip code):
SANCTUARY, INCORPORATED - AYUDA PARA I KOMUNIDAT

3. DUNS Number: 025284

4a. EIN: 96-0002543

5. Recipient Account Number or Identifying Number: 11AFHGU0010011

6. Report Type: Quarterly, Semi-Annual, Annual, Final

7. Basis of Accounting: Cash, Accrual

8. Reporting Period End Date (Month, Day, Year): April 01, 2014 - June 30, 2014

9. Reporting Period Start Date (Month, Day, Year): 1-Oct-13 To: 30-Sep-14

Transactions	Cumulative
lines a-c for single or multiple grant reporting	
Federal Cash	
Cash Receipts	
Cash Disbursements	
Cash on Hand (line a minus b)	\$0.00
lines d-o for single grant reporting	
Federal Expenditures and Unobligated Balance:	
Total Federal funds authorized	\$0.00
Federal share of expenditures	
Federal share of unliquidated obligations	\$540,013.00
Total Federal share (sum of lines e and f)	\$191,155.72
Unobligated balance of Federal funds (line d minus g)	\$0.00
Recipient Share:	
Total recipient share required	\$191,155.72
Recipient share of expenditures	\$348,857.28
Remaining recipient share to be provided (line i minus j)	\$25,252.00
Program Income:	
Total Federal program income earned	\$7,021.27
Program income expended in accordance with the deduction alternative	\$18,230.73
Program income expended in accordance with the addition alternative	\$0.00
Unexpended program income (line l minus line m or line n)	\$0.00

Direct Base	a. Type	b. Rate	c. Period From	Period To	d. Base	e. Amount Charged	f. Federal Share
None	N/A		N/A	N/A	N/A	0	0
g. Totals:							

Remarks: Attach any explanations deemed necessary or information required by Federal sponsoring agency in compliance with governing legislation.

Certification: By signing this report, I certify that it is true, complete, and accurate to the best of my knowledge. I am aware that any false, fictitious, or fraudulent information may subject me to criminal, civil, or administrative penalties. (U.S. Code, Title 18, Section 1001)

Name and Title of Authorized Certifying Official: **Ed Q. Lujan, Executive Director**

Telephone (Area code, number and extension): (671) 475-7101

Email address: inquiries@sanctuaryguam.org

Date Report Submitted (Month, Day, Year): 8-Jul-14

14. Agency use only:

Standard Form 425
 OMB Approval Number: 0348-0061
 Expiration Date: 10/31/2011

Work Burden Statement

Pursuant to the Paperwork Reduction Act, as amended, no persons are required to respond to a collection of information unless it displays a valid OMB Control Number. The valid OMB number for this information collection is 0348-0061. Public reporting burden for this collection of information is estimated to average 1.5 hours per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0348-0060), Washington, DC 20503.

JUL 13 2014

ORIGINAL



DEPT. OF ADMINISTRATION STAMP REC'D

REIMBURSEMENT FORMULA GRANT REQUEST FORM

FROM: SANCTUARY, INCORPORATED
 AC PROGRAM NAME: AYUDA PARA I KOMUNIDAT
 ADDRESS: 406 MAI MAI ROAD
 CHALAN PAGO, GUAM 96910

AC GRANT AWARD NUMBER 11AFHGU0010011	AC GRANT ID NUMBER 13AC156206	DOA VENDOR NUMBER 51456001	DOA CONTRACT NUMBER C123400000	EMPLOYER ID 96-0002543	EMPLOYER DUNNS NUMBER 85502584
PROGRAM PERIOD: 2013-2014			PERIOD CLAIMING FOR: Jun-14		
REQUEST NUMBER: 2013-06		FINAL CLAIM: YES			
ACCOUNT NUMBER: 5101H		NO X			
DEPT. OF ADMIN.	AMOUNT	AS400 PMT	CHK NUMBER	CNCS HHS DTE APPROVED	ATTACH CNCS EMAIL: HHS AMOUNT APPROVED
FUNDS REQUESTED	38,454.35				
GRANT AWARD	\$ 540,013.00				
LESS: PREVIOUSLY REQUESTED:	\$ 152,701.37				
SUB-TOTAL	\$ 387,311.63				
LESS: AMOUNT OF THIS REPORT	\$ 38,454.35				
GRANT BALANCE:	\$ 348,857.28				

Certification: I certify to the best of my knowledge that this report is true and correct and that PROGRAM & FISCAL expenditures are approved and signed for purposes set forth and in the Grant Award. I understand that failure to comply in submitting on time due to late and chronic reporting will result on one warning notice, suspension of contract and corrective actions to include possible withholding of payment.

PROGRAM DIRECTOR/ DATE: [Signature] 7-8-14
 CERTIFYING OFFICER/ DATE: [Signature] 7-8-14
 EXECUTIVE DIRECTOR/ DATE: _____

SGC/ DOL USE ONLY -

Reviewed against PERIODIC EXPENSE REPORT (PER) & BUDGET MODIFICATION

SGC/ AMERICORPS PROGRAM COMPLIANCE:	SGC/ DOL ACCOUNTING DEPT. COMPLIANCE
Darrel Wilkerson/ Signature/ Date: _____ SGC Planner II <input type="checkbox"/> AC Program Reports <input checked="" type="checkbox"/> NPM <input type="checkbox"/> Other Program Documents Submit: Hard Copy/ eCopy (DOL email)	Carmelita O'Brien/ Signature/ Date: _____ DOL Administrative Assistant <input type="checkbox"/> PER REIMBURSEMENT <input type="checkbox"/> BUDGET MODIFICATION Submit: Supporting Documents
<input type="checkbox"/> DEMOGRAPHICS <input type="checkbox"/> MSY'S/ MEMBERS <input type="checkbox"/> PERFORMANCE INDICATORS:	EGRANTS NPM SUBMISSION: <input type="checkbox"/> PERFORMANCE MESURES <input type="checkbox"/> SUMMARY

SGC/ DDOL - ASSURANCE & CERTIFICATION:

DOL CERTIFYING OFFICER/ DATE: _____
 Nellie N. Asanuma

SGC EXECUTIVE DIRECTOR/ DATE: _____
 Doris M. Aguon

REMARKS:	DEPT. OF LABOR STAMP REC'D.
----------	-----------------------------

RECEIVED
 7-8-14



SANCTUARY INCORPORATED - AYUDA PARA KOMUNITAS PROGRAM: PY2013-2014

Section I	PROGRAM SHARE	1ST MAR BUDGET MODIFICATION	BUDGET TOTAL	JAN	FEB	MAR	APR	MAY	JUNE	JULY	AUG	SEPT	OCT	NOV	DEC	PROGRAM TOTAL	EMCS BUDGET YTD BAL
A Personnel																	
Program Director	13,934.00	-9,968.18	3,965.82	964.66	964.56	964.66	1,071.94									3,965.82	
Accounting Assistant II	2,849.00	9,968.18	12,817.18	219.20	219.20	219.20	246.27	419.04	279.36							1,602.27	
Administrative Aide	0.00			0.00	0.00	0.00	0.00	0.00	0.00							0.00	
Program Coordinator	0.00			0.00	0.00	0.00	0.00	0.00	0.00							0.00	
Total - Personnel	16,783.00	0.00	16,783.00	1,183.86	1,183.86	1,183.86	1,318.11	419.04	279.36	0.00	0.00	0.00	0.00	0.00	0.00	3,965.82	11,214.91
B Fringe																	
FICA	1,284.00			90.56	90.56	90.56	100.84	32.07	21.38							365.37	
Health Insurance	4,320.00			0.00	0.00	0.00	0.00	770.40	0.00							770.40	
Worker's Compensation	125.00			0.00	0.00	255.80	0.00	0.00	0.00							255.80	
Total - Fringe	5,729.00	0.00	5,729.00	90.56	90.56	347.36	100.84	802.47	21.38	0.00	0.00	0.00	0.00	0.00	0.00	1,391.57	1,214.91
C Staff Travel	22,512.00	0.00	22,512.00	1,274.42	1,274.42	1,531.22	1,418.96	1,221.51	300.74	0.00	0.00	0.00	0.00	0.00	0.00	1,027.20	1,274.42
National Volunteer Conf	0.00			0.00	0.00	0.00	0.00	0.00	0.00							0.00	
MVSN	0.00			0.00	0.00	0.00	0.00	0.00	0.00							0.00	
Local Mileage	0.00			0.00	0.00	0.00	0.00	0.00	0.00							0.00	
S/Total - member travel	0.00			0.00	0.00	0.00	0.00	0.00	0.00							0.00	
D/Total - travel	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
E Equipment	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
F Supplies:																	
Program Supplies / Materials	0.00			0.00	0.00	0.00	0.00	0.00	0.00							0.00	
Office Supplies	0.00			0.00	0.00	0.00	0.00	0.00	0.00							0.00	
Gasoline	0.00			0.00	0.00	0.00	0.00	0.00	0.00							0.00	
Service Gears	0.00			0.00	0.00	0.00	0.00	0.00	0.00							0.00	
S/Total - Supplies	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
F Contractual:																	
Xerox Copier	0.00			0.00	0.00	0.00	0.00	0.00	0.00							0.00	
Internet Service	0.00			0.00	0.00	0.00	0.00	0.00	0.00							0.00	
Vehicle Lease	0.00			0.00	0.00	0.00	0.00	0.00	0.00							0.00	
Telephone	0.00			0.00	0.00	0.00	0.00	0.00	0.00							0.00	
Cell Phone	0.00			0.00	0.00	0.00	0.00	0.00	0.00							0.00	
GVC Conf.	0.00			0.00	0.00	0.00	0.00	0.00	0.00							0.00	
S/Total - Contractual	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
G Staff Training																	
AC Policies & Procedures	0.00			0.00	0.00	0.00	0.00	0.00	0.00							0.00	
Evaluation	0.00			0.00	0.00	0.00	0.00	0.00	0.00							0.00	
S/Staff Training	0.00			0.00	0.00	0.00	0.00	0.00	0.00							0.00	
Member Training:																	
Pre-Service Orientation	0.00			0.00	0.00	0.00	0.00	0.00	0.00							0.00	
First Aid & CPR	0.00			0.00	0.00	0.00	0.00	0.00	0.00							0.00	
CERT Training	0.00			0.00	0.00	0.00	0.00	0.00	0.00							0.00	
Team Building	0.00			0.00	0.00	0.00	0.00	0.00	0.00							0.00	
Assist	0.00			0.00	0.00	0.00	0.00	0.00	0.00							0.00	

Attachment 2

Sanctuary, Incorporated of Guam Foster Care Program

Reporting Agency

Department of Public Health and Social Services

Reports

1. List of expenditures for services and equipment \$5,000 or greater
2. Quarterly financial expenditures and obligation
3. Program progress report



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July 7, 2014

RECEIVED
Director's Office
Division Of General Administration

To: James Gillan
Director
Bureau of Social Service, Division of Public Health Welfare
Department of Public Health and Social Service

DPH&SS
Time: 12:35 Locator#:

From: OJ Taitano
Acting Executive Director
Sanctuary, Incorporated of Guam

Re: Program Report

Attached is the quarterly program status report for April 1, 2014 through June 30, 2014.

Should you have any questions, please feel free to contact myself at 475-7101 ext. 119 or Mike Franquez at 475-7101 ext. 116.

Sincerely,

OJ Taitano, Acting Executive Director
Sanctuary Incorporated of Guam

June 20, 2014

MEMORANDUM

To: All Staff
From: Executive Director
RE: Acting Executive Director

Hafa Adai:

Please be advised that effective Monday, June 23, 2014, I will be on leave til July 25, 2014. In my absence, I am appointing OJ Taitano Acting Executive Director. Mr. Taitano will be assisted by Mr. Mike Franquez.

Please give your usual support and cooperation extended to OJ and Mike during this time.

Si Yu'os Ma'ase,


Mildred Q. Lujan



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Foster Care Payments

Bureau of Social Service, Division of Public Health Welfare

Department of Public Health and Social Service

Report Period: April 1, 2014 – June 30, 2014

Sanctuary, Incorporated receives foster care payments from DPHSS for those children/youth that are referred by Child Protective Services (CPS).

No reports are required although every year Sanctuary reapplies for Licensure that includes site visits to ensure the health and safety of the clients. Periodic visits by DPHSS staff also occur to monitor the shelters for compliance and to meet with the clients.

The amount of reimbursement varies from month to month depending on the number of clients who are in residence for that period. In addition, a monthly clothing allowance may be added.

The current reimbursement rate per month is **\$742.31 per child** for a full month or a pro-rated amount thereof.

The clients referred to Sanctuary for foster care from DPHSS for this period were:

Month	Full	Partial
April 2014	5	4
May 2014	6	0
June 2014	5	2
Total:	16	6



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www.sanctuaryguam.org



July 15, 2014

Mr. James Gillian
Director
Department of Public Health and Social Services
123 Chalan Kareta Route 10
Mangilao, Guam 96913

Dear Mr. Gillian:

The information listed below is for the Foster Care Program for the 3rd quarter of Fiscal Year 2014 from April 1, 2014 to June 30, 2014.

We have listed all expenditures for services and equipment that were \$5,000 or greater.

Services	-0-
Equipment	-0-
Inventory Property	-0-

Please let us know if you have any questions.

Sincerely,


OJ Taitano
Acting Executive Director

Non Profit Organization Receiving Appropriations from Government of Guam
Pursuant to P.L. 31-77 (Sanctuary, Incorporated)
FY 2014 (April 1, 2014 - June 30, 2014)
3rd Quarter Expenditure Report
Department of Public Health and Social Services
Foster Care

Fund	Contract Amount	Object Classification	Expenditure
General	\$ 30,466		
		Salary	\$ 5,665
		Benefits	801
		Travel	0
		Contractual	0
		Supplies & Materials	3,000
		Equipment	0
		Utilities	2,000
		Miscellaneous	0
		Grand Total	<u>\$ 11,466</u>

I CERTIFY THAT THIS IS A TRUE AND CORRECT STATEMENT OF THE EXPENDITURES FOR FISCAL YEAR 2014 FOR THE PROJECT ABOVE.

SIGNATURE OF AUTHORIZED OFFICIAL:



 OJ TAITANO
 ACTING, EXECUTIVE DIRECTOR

DATE: 7/16/14

Sanctuary, Incorporated
Profit & Loss Budget Overview - Foster Care
October 2013 through June 2014

	Oct - Dec 13	Budget	\$ Over Budget	Jan - Mar 14	Budget	\$ Over Budget	Apr - Jun 14	Budget	\$ Over Budget	Oct 13 - Jun 14	TOTAL Budget	\$ Over Budget
Ordinary Income/Expense												
Income												
Grants	8,276.33	5,808.22	2,468.11	7,750.60	4,100.48	3,650.12	14,439.38	9,704.13	4,735.25	30,468.31	19,612.83	10,853.48
Total Income	8,276.33	5,808.22	2,468.11	7,750.60	4,100.48	3,650.12	14,439.38	9,704.13	4,735.25	30,468.31	19,612.83	10,853.48
Gross Profit	8,276.33	5,808.22	2,468.11	7,750.60	4,100.48	3,650.12	14,439.38	9,704.13	4,735.25	30,468.31	19,612.83	10,853.48
Expense												
Professional Fees	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Equipment Lease	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Insurance	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Supplies	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Utilities	0.00	50.00	-50.00	0.00	17.95	-17.95	0.00	0.00	0.00	0.00	0.00	0.00
Police/Court Clearance	0.00	695.40	-695.40	0.00	701.40	-701.40	0.00	465.60	0.00	0.00	67.95	-67.95
Contractual Services	0.00	851.17	-851.17	15.00	250.00	-235.00	0.00	0.00	0.00	15.00	1,882.40	-1,867.40
Payroll Expenses	0.00	0.00	0.00	240.00	250.00	-10.00	0.00	1,421.19	-1,421.19	240.00	2,522.36	-2,282.36
Personnel	5,819.61	3,790.38	2,029.23	0.00	4,941.33	131.58	1,028.00	5,610.76	-173.05	1,028.00	14,342.47	1,987.76
Total Expense	5,819.61	5,398.95	432.66	5,072.91	5,910.65	-837.77	6,466.71	7,497.55	-1,031.84	18,330.23	18,795.18	-1,464.95
Net Ordinary Income	2,456.72	421.27	2,035.45	2,677.69	-810.20	4,232.89	7,972.67	2,206.58	5,767.09	12,853.08	817.65	12,035.43
Net Income	2,456.72	421.27	2,035.45	2,677.69	-810.20	4,232.89	7,972.67	2,206.58	5,767.09	12,853.08	817.65	12,035.43

Attachment 3

Sanctuary, Incorporated of Guam
Rehabilitation Services for Adolescents

Reporting Agency

Guam Behavioral Health and Wellness Center

Reports

1. List of expenditures for services and equipment \$5,000 or greater
2. Quarterly financial expenditures and obligation
3. Program progress report



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July 2, 2014

To: Ray Vega
Acting Director
Guam Behavioral Health & Wellness Center

Attn: Don P. Sabang
Drug and Alcohol Supervisor
Guam Behavioral Health & Wellness Center

From: Mildred Q. Lujan
Executive Director
Sanctuary, Incorporated

Re: Rehabilitation Services for Adolescents Report

Attached with this memorandum is the Bi-Weekly Program Status Report for the weeks of June 16, 2014 to June 30, 2014.

If you should have any questions, please feel free to contact myself at 475-7101.

Sincerely,


OJ Taitano
Acting Executive Director

June 20, 2014

MEMORANDUM

To: All Staff
From: Executive Director
RE: Acting Executive Director

Hafa Adai:

Please be advised that effective Monday, June 23, 2014, I will be on leave til July 25, 2014. In my absence, I am appointing OJ Taitano Acting Executive Director. Mr. Taitano will be assisted by Mr. Mike Franquez.

Please give your usual support and cooperation extended to OJ and Mike during this time.

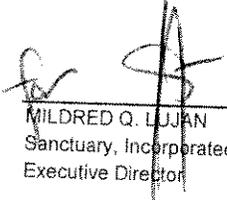
Si Yu'os Ma'ase,


Mildred Q. Lujan

FROM: SANCTUARY, INCORPORATED Drug & Alcohol Residential Treatment Program - Sagan Na' Homlo		Address: 790 Gov. Carlos G. Camacho Rd. Tamuning, Guam 96913	DATE: 6/30/2014
TO: Mr. Ray Vega Director Guam Behavioral Health & Wellness Center (DMHSA)		Vendor Acct. No. S1456001 Document No. Contract No. Job Order No. Purchase Order No. Invoice No. DMHSA-2014-018	
COSTS INCURRED BY CATEGORY		AMOUNT	
1. Personnel		\$	20,336.66
2. Fringe Benefits		\$	2,400.00
3. Contractual		\$	400.00
4. Other		\$	350.00
5. Supplies		\$	1,000.00
6. Utilities		\$	2,180.00

TOTAL PAYMENT REQUEST: \$ 26,666.66

I CERTIFY that the costs in this Request for Payment are accurate and eligible under the provisions of the Drug & Alcohol Residential Treatment Program - Sagan Na' Homlo and that this is a true and certified original.


 MILDRED Q. LUJAN
 Sanctuary, Incorporated
 Executive Director

7/1/14
 Date

Recommended for payment: I certify Invoice No. DMHSA-2014-016 to be true and correct; and that services for June 16-30, 2014 have been rendered; and payment for this period is due.

 Don Sabang
 D & A Supervisor

Bi-Weekly Reporting Period:

Rehabilitation Services for Adolescents
June 16, 2014 through June 30, 2014

Task/Activity

Sanctuary, Inc. Bi-Weekly Progress Report

II.2 Increase treatment capacity in ASAM Level I Outpatient, known as the "Pathways" program and serve up to twenty (20) adolescents per treatment cycle and shall perform the following tasks: State the number of clients served, as well as those who successfully completed, within the reporting period. If applicable, state the number of clients transferred to another level of care and those on a "wait-list."

In narrative form, state how activities from II.2.a to II.2.c were implemented and addressed?

In narrative form, briefly state how clients benefited from the core functions or services from this level?

State any commendations to show the strengths of the Program:

State any recommendations for the improvement of service delivery:

II.3 Establish an ASAM Level II Intensive Outpatient treatment program with a treatment capacity of ten (10) adolescents per treatment cycle and shall perform the following tasks: State the number of clients served, as well as those who successfully completed, within the reporting period. If applicable, state the number of clients transferred to another level of care and those on a "wait-

During this bi-weekly reporting period:

- 6 group sessions
- 19 participants in attendance [06/21/14(7); 06/28/14 (12)]
- Groups are held on Saturday from 12-2 pm and education groups are held from 2:15 – 3:15 at the Sanctuary, Inc. Main Office.
- Number of Successful Completions: 0
- Number of Clients Transferred to another level of Care: 0
- Number of Clients on the Wait List: 1

8 Active Clients NON-DUPLICATE

The Group lesson/activity was: Daily Schedule and Calendars; Triggers and Cravings; You are here because why; pros and cons; guilt and shame; amphetamines. Each client was provided the opportunity to discuss each topic.

Clients are taught to analyze events and change their thoughts and behaviors that lead to substance use and change the results to a more positive behavior that meets their goals. Clients are taught skills to prevent substance use and relapse; are guided in recognizing and planning events that are not associated with substance use; and rewarded for meeting their goals with incentives.

The strength of the class based on staff observation, was that each client was able to share in a small group setting and get feedback from peers that support their efforts towards recovery. Clients are able to encourage each other to continue working on their goals and share their experience on what has helped them overcome obstacles. The groups allow the parents and their child to practice new skills and information learned; and provide activities to practice with their families.

Staff to continue our networking efforts with community partners as well as be open to input and feedback. Staff continues to research the latest information through articles, journals, and on-line updates.

During this bi-weekly reporting period:

- 10 sessions were conducted
- 62 participants in attendance [06/20/14 (16); 06/21/14 (16); 06/27/14 (12); 06/28/14 (18)]
- Group time identified for Fridays from 3:30 – 4:30pm & 4:30-5:30pm and Saturdays from 12:00pm—3:15pm at the Sanctuary, Inc. Main Office.

Bi-Weekly Reporting Period:

Rehabilitation Services for Adolescents
June 16, 2014 through June 30, 2014

Task / Activity

Sanctuary, Inc. Bi-Weekly Progress Report

list."

II.3a Treatment capacity in ASAM Level 0.7 for all individuals who completed level II. State the number of clients served, as well as those who successfully completed, within the reporting period. If applicable, state the number of clients

During this Bi-weekly reporting period:

- Number of Successful Completions: 0
- Number of Clients Transferred to another level of Care: 0
- Number of Clients on the Wait List: 2
- Active Clients: 9

In narrative form, briefly state how activities from II.3.a to II.3.e were implemented and addressed?

The Group lesson/activity was: weekly check-in; review of group rules; Calendar; Treatment Planning; You're Hear Because Why; Triggers and Cravings; Pursuit of Happiness; Relapse Analysis Chart; Alcohol Arguments; Amphetamines; Relapse Is Not a Failure; and Stages of Recovery. Clients were provided with psycho-education for each topic. They were also given the opportunity to share real-life experiences related to each topic and offer feedback to peers for support and process.

In narrative form, briefly state how clients benefited from the core functions or services from this level?

Participants continue to explore pros and cons for use or staying clean and sober to help them to make informed and well thought out decisions about their use. Small group discussions facilitate understanding of the importance of each topic in recovery. Role-play, rehearsal, repetition, and practice in session help clients to identify strengths and needs. In addition, group participation teaches empathy and helps to develop effective communication skills.

State any commendations to show the strengths of the Program:

The strength of the small group setting is that it allows for a larger amount of attention, help, and feedback offered to each individual client, thereby encouraging engagement and active participation in their treatment.

State any recommendations for the improvement of service delivery:

Staff to continue networking efforts with community partners as well as be open to input and feedback. Staff continues to research the latest information through articles, journals, and on-line updates.

MATRIX Model Parent Education / Support Group

During this bi-weekly reporting period:

- 4 sessions were conducted

Bi-Weekly Reporting Period:

Rehabilitation Services for Adolescents
June 16, 2014 through June 30, 2014

Task/Activity

Sanctuary, Inc. Bi-Weekly Progress Report

- Family Members in attendance [(6/21 (9), 6/28 (11), 6/22/14 (1), 6/28/14 (2))]
- Group time identified for Saturdays from 12:00pm—1:30pm at the Sanctuary, Inc. Main Office.
- Number of Successful Completions: 0
- Number of Clients Transferred to another level of Care: N/A
- Number of Clients on the Wait List: N/A

In narrative form, briefly state how activities from Matrix Parent Education/Support Group were implemented and addressed?

The group lessons/activities included: Setting Healthy Boundaries and Limits; Tips for setting healthy boundaries; and Avoiding/Coping with Relapse. Open discussion on each topic followed. Questions, answered, and comments were addressed to close out the sessions.

In narrative form, briefly state how Family benefited from the core functions or services from this level?

Small group discussions facilitate understanding of the importance of each topic in recovery. Various examples provided on each topic offer opportunities for family members to reflect on how they could put each topic discussed to use for them. In addition, group participation teaches empathy and helps to develop effective communication skills.

State any commendations to show the strengths of the Program:

Due to the census of the Family Members wanting to have group on a weekend, accommodations were made moving the group to Saturdays. Each Family member who is not able to attend the groups on Saturdays are still considered and accommodations continue to be made on a case by case basis. Staff to continue networking efforts with community partners as well as be open to input and feedback. Staff continues to research the latest information through articles, journals, and on-line updates.

State any recommendations for the improvement of service delivery:

During this bi-weekly reporting period:

- 6 Clients were served.
- Transfer to another level of Care: 1 (Aftercare)
- Wait Listing: 2

II.5 Maintain treatment capacity in ASAM Level III.5 to serve 6 to 8 adolescents (male or female) at any given time. State the number of clients served, as well as those who successfully completed, within the reporting period. If applicable, state the number of clients transferred to another level of care and those on a "wait-list."

- Phase Breakdown:
- Orientation: 0
 - Awareness: 2
 - Enhancement: 0
 - Enlightenment: 2
 - Empowerment: 1

Bi-Weekly Reporting Period:

Rehabilitation Services for Adolescents
 June 16, 2014 through June 30, 2014

Task/Activity

Sanctuary, Inc. Bi-Weekly Progress Report

<p>II.5a Treatment capacity in ASAM Level 0.7 for all individuals who completed level III.5. State the number of clients served, as well as those who successfully completed, within the reporting period. If applicable, state the number of clients</p>	<ul style="list-style-type: none"> • Completion/Graduation: 1 <p>During this Bi-weekly reporting period:</p> <ul style="list-style-type: none"> • 4 Clients in Aftercare (Social Support) Level 0.7 • Transfer to another level of Care: 0
<p>In narrative form, briefly state how activities from II.5.b to II.5.f were implemented and addressed?</p>	<p>Sagan Na' Homlo is a 24/7 structured program where clients participate in a regulated daily routine schedule from morning physical exercises to classroom work, group sessions (i.e. substance abuse, anger management, decision making, relapse prevention, life skills, team building, relationship intelligence; emotional wellness; big book and 12-step education), individual counseling sessions, individual case management sessions, meditation and evening recreation. Sanctuary continues to host 12-Step Meetings: Adolescent AA and NA at our Main Facility and is available to all clients based on desire and appropriateness.</p>
<p>In narrative form, briefly state how clients benefited from the core functions or services from this level?</p>	<p>The continuity of treatment in this level of care provides the clients consistent contact with residential staff and the opportunity for support when the need arises.</p>
<p>State any commendations to show the strengths of the Program:</p>	<p>Sagan Na' Homlo is the only Adolescent residential treatment on Guam. In addition, Sagan Na' Homlo offers the individual and family the opportunity to restructure, refrain and to recover with the challenges of drug and alcohol addiction and eventually re-integrate back into the community as a productive member of society. Sanctuary, Incorporated has implemented Evidence Based Matrix Model incorporating individual sessions, family sessions, early recovery group, relapse prevention group, and 12 step participation.</p>
<p>State any recommendations for the improvement of service delivery:</p>	<p>All efforts are channeled in enhancing our working relationship with our community partners and significant agencies.</p>
<p>II.6 Implement evidence-based models and practices in all levels of care and shall demonstrate the following: In narrative form, state how the activities from II.6.a to II.6.d were implemented and addressed.</p>	<p>Multi-level Interventions are still considered the best practice. It provides and allows insight, growth, emotional well-being, recognition of strengths, ability to communicate, group and family counseling and the opportunity to share openly, express them-selves and work on problems.</p>
<p>II.7 Work with DMHSA and its partners to establish a system of care for substance abuse</p>	<p>Program staff continues to work with Department of Youth Affairs, Guam Public School System (GPSS), Juvenile Drug Court (JDC), Community</p>

Bi-Weekly Reporting Period:

Rehabilitation Services for Adolescents
June 16, 2014 through June 30, 2014

Task/Activity

Sanctuary, Inc. Bi-Weekly Progress Report

summary of activities that occurred with DMHSA and its partners during the reporting period.

Association of Social Workers (NASW) and Association of Individual, Marriage, and Family Therapist (AIMFT) monthly.

II.8 Ensure all clients receive appropriate screening and assessment for placement into ASAM Levels 0,5, I, II, III-5, and 0,7: Briefly state how sections II.7.a to II.7.e are being addressed.

The Drug and Alcohol screening/assessments are processed with the Clinical Supervisor and staffing is conducted throughout the week during weekly case staffing or on a case by case need using the American Society of Addiction Medicine Patient Placement Criteria (ASAM-PPC).

II.9 Provide its staff with opportunities for staff development by performing the following tasks: Briefly state the status of staff members seeking certification with IC & RC and what trainings they attended during the reporting period.

- Sagan Na' Homlo currently has 3 certified ICRC Counselor working with the youth in the inpatient / outpatient programs.
- One counselor is a licensed IMFT Therapist.
- I staff continues to work on her CEU's that apply towards the ICRC Certification.
- I staff is currently working on becoming a Recovery Coach by attending training and meeting with Clinical Supervisor for supervision to prepare for ICRC Certification.
- Case Manager is working toward IC&RC Certification.

DMHSA Representative:

Received By: *[Signature]*

Position Title: *[Signature]*

Date of Submission: *7/2/14 - 12/23/14*

Submitted By: Eugene Anderson
Position Title: Case Manager
Reviewed By: OJ Taitano
Position Title: Program Director
Date: July 2, 2014



Sanctuary, Incorporated of Guam

A Non-profit Organization Established in 1971

406 MaiMai Road Chalan Pago, Guam 96910 • Administrative Office (671)475-7101

Crisis Hotline (671)475-7100 • Fax (671)477-3117 •

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June 17, 2014

To: Ray Vega
Acting Director
Guam Behavioral Health & Wellness Center

Attn: Don P. Sabang
Drug and Alcohol Supervisor
Guam Behavioral Health & Wellness Center

From: Mildred Q. Lujan
Executive Director
Sanctuary, Incorporated

Re: Rehabilitation Services for Adolescents Report

Attached with this memorandum is the Bi-Weekly Program Status Report for the weeks of June 1, 2014 to June 15, 2014.

If you should have any questions, please feel free to contact myself or OJ Taitano at 475-7101.

Sincerely,


Mildred Q. Lujan
Executive Director



Rehabilitation Services for Adolescents	
Bi-Weekly Reporting Period:	June 1, 2014 through June 15, 2014
Task/Activity	Sanctuary, Inc. Bi-Weekly Progress Report
<p>II.2 Increase treatment capacity in ASAM Level I Outpatient, known as the "Pathways" program and serve up to twenty (20) adolescents per treatment cycle and shall perform the following tasks: State the number of clients served, as well as those who successfully completed, within the reporting period. If applicable, state the number of clients transferred to another level of care and those on a "wait-list."</p>	<p>During this bi-weekly reporting period:</p> <ul style="list-style-type: none"> • 6 group sessions • participants in attendance [06/07/14(9); 06/14/14 (9)] • Groups are held on Saturday from 12-2 pm and education groups are held from 2:15 – 3:15 at the Sanctuary, Inc. Main Office. • Number of Successful Completions: • Number of Clients Transferred to another level of Care: 0 • Number of Clients on the Wait List: 4
<p>In narrative form, state how activities from II.2.a to II.2.c were implemented and addressed?</p> <p>In narrative form, briefly state how clients benefited from the core functions or services from this level?</p> <p>State any commendations to show the strengths of the Program:</p> <p>State any recommendations for the improvement of service delivery:</p>	<p>7 Active Clients NON-DUPLICATE</p> <p>The Group lesson/activity was: Daily Schedule and Calendars; Club drugs; Staying busy; Trigger chart; Soft is a heart of a child; Trust. Each client was provided the opportunity to discuss each topic. Clients are taught to analyze events and change their thoughts and behaviors that lead to substance use and change the results to a more positive behavior that meets their goals. Clients are taught skills to prevent substance use and relapse; are guided in recognizing and planning events that are not associated with substance use; and rewarded for meeting their goals with incentives.</p> <p>The strength of the class based on staff observation, was that each client was able to share in a small group setting and get feedback from peers that support their efforts towards recovery. Clients are able to encourage each other to continue working on their goals and share their experience on what has helped them overcome obstacles. The groups allow the parents and their child to practice new skills and information learned; and provide activities to practice with their families.</p> <p>Staff to continue our networking efforts with community partners as well as be open to input and feedback. Staff continues to research the latest information through articles, journals, and on-line updates.</p> <p>During this bi-weekly reporting period:</p> <ul style="list-style-type: none"> • 10 sessions were conducted • 38 participants in attendance [06/06/14 (4); 06/07/14 (12); 06/13/14 (10); 06/14/14 (12)]
<p>II.3 Establish an ASAM Level II Intensive Outpatient treatment program with a treatment capacity of ten (10) adolescents per treatment cycle and shall perform the following tasks: State the number of clients served, as well as those who successfully completed, within the</p>	

Rehabilitation Services for Adolescents	
June 1, 2014 through June 15, 2014	
Task/Activity	Sanctuary, Inc. Bi-Weekly Progress Report
reporting period. If applicable, state the number of clients transferred to another level of care and those on a "wait-list."	<ul style="list-style-type: none"> • Group time identified for Fridays from 3:30 – 4:30pm & 4:30-5:30pm and Saturdays from 12:00pm—3:15pm at the Sanctuary, Inc. Main Office. • Number of Successful Completions: 0 • Number of Clients Transferred to another level of Care: 0 • Number of Clients on the Wait List: 2 • Active Clients: 7
II.3a Treatment capacity in ASAM Level 0.7 for all individuals who completed level II. State the number of clients served, as well as those who successfully completed, within the reporting period. If applicable, state the number of clients	<p>During this Bi-weekly reporting period:</p> <ul style="list-style-type: none"> • 5 Clients in Aftercare (Social Support) Level 0.7 • Transfer to another level of Care: 0
In narrative form, briefly state how activities from II.3.a to II.3.e were implemented and addressed?	<p>The Group lesson/activity was: weekly check-in; review of group rules; Calendar; Trigger-Thought-Craving-Use; Abusing Prescription Medications and Inhalants; 12-Step Tips; Thought Stopping Techniques; Club Drugs; External Trigger Questionnaire; Trigger Chart; Internal Trigger Questionnaire; Trust; and Soft Is The Heart of a Child. Clients were provided with psycho-education for each topic. They were also given the opportunity to share real-life experiences related to each topic and offer feedback to peers for support and process.</p> <p>Participants continue to explore pros and cons for use or staying clean and sober to help them to make informed and well thought out decisions about their use. Small group discussions facilitate understanding of the importance of each topic in recovery. Role-play, rehearsal, repetition, and practice in session help clients to identify strengths and needs. In addition, group participation teaches empathy and helps to develop effective communication skills.</p>
In narrative form, briefly state how clients benefited from the core functions or services from this level?	<p>The strength of the small group setting is that it allows for a larger amount of attention, help, and feedback offered to each individual client, thereby encouraging engagement and active participation in their treatment.</p>
State any commendations to show the strengths of the Program:	

Rehabilitation Services for Adolescents	
June 1, 2014 through June 15, 2014	
Sanctuary, Inc. Bi-Weekly Progress Report	
Bi-Weekly Reporting Period:	Task/Activity
State any recommendations for the improvement of service delivery:	Staff to continue networking efforts with community partners as well as be open to input and feedback. Staff continues to research the latest information through articles, journals, and on-line updates. During this bi-weekly reporting period:
MATRIX Model Family Education: Parent Education / Support Group	<ul style="list-style-type: none"> • 4 session were conducted • Family Members in attendance [6/1 (2); 6/7 (5); 6/14 (7); 6/15 (3)] • Group time identified for Saturdays from 12:00pm—2:00pm at the Sanctuary, Inc. Main Office. • Number of Successful Completions: N/A • Number of Clients Transferred to another level of Care: N/A • Number of Clients on the Wait List: N/A
In narrative form, briefly state how activities from Matrix Parent Education/Support Group were implemented and addressed?	The group lessons/activities included: Family Conflict: Is it OK?; Parents have problems to; So you're willing to share your experience; Is this normal for my teen. Family members viewed a video on the effects of alcohol on the family. Open discussion on each topic followed. Questions, answered, and comments were addressed to close out the sessions. Small group discussions facilitate understanding of the importance of each topic in recovery. Various examples provided on each topic offer opportunities for family members to reflect on how they could put each topic discussed to use for them. In addition, group participation teaches empathy and helps to develop effective communication skills.
In narrative form, briefly state how Family benefited from the core functions or services from this level?	Due to the census of the Family Members wanting to have group on a weekend, accommodations were made moving the group to Saturdays. Each Family member who is not able to attend the groups on Saturdays are still considered and accommodations continue to be made on a case by case basis.
State any commendations to show the strengths of the Program:	Staff to continue networking efforts with community partners as well as be open to input and feedback. Staff continues to research the latest information through articles, journals, and on-line updates.
State any recommendations for the improvement of service delivery:	

Rehabilitation Services for Adolescents	
June 1, 2014 through June 15, 2014	
Sanctuary, Inc. Bi-Weekly Progress Report	
Bi-Weekly Reporting Period:	Task/Activity
<p>II.5 Maintain treatment capacity in ASAM Level III.5 to serve 6 to 8 adolescents (male or female) at any given time. State the number of clients served, as well as those who successfully completed, within the reporting period. If applicable, state the number of clients transferred to another level of care and those on a "wait-list."</p>	<p>During this bi-weekly reporting period:</p> <ul style="list-style-type: none"> • 4 Clients were served. • Transfer to another level of Care: 0 (Aftercare) • Wait Listing: 3 <p>Phase Breakdown:</p> <ul style="list-style-type: none"> • Orientation: • Awareness: 0 • Enhancement: 2 • Enlightenment: 1 • Empowerment: 1
<p>II.5a Treatment capacity in ASAM Level 0.7 for all individuals who completed level III.5. State the number of clients served, as well as those who successfully completed, within the reporting period. If applicable, state the number of clients</p>	<p>During this Bi-weekly reporting period:</p> <ul style="list-style-type: none"> • 0 Clients in Aftercare (Social Support) Level 0.7 • Transfer to another level of Care: 0
<p>In narrative form, briefly state how activities from II.5.b to II.5.f were implemented and addressed?</p>	<p>Sagan Na' Homlo is a 24/7 structured program where clients participate in a regulated daily routine schedule from morning physical exercises to classroom work, group sessions (i.e. substance abuse, anger management, decision making, relapse prevention, life skills, team building, relationship intelligence; emotional wellness; big book and 12-step education), individual counseling sessions, individual case management sessions, meditation and evening recreation. Sanctuary continues to host 12-Step Meetings: Sanctuary continues to host AL-NON Meetings at our Main Facility and is available to all clients based on desire and appropriateness.</p> <p>The continuity of treatment in this level of care provides the clients consistent contact with residential staff and the opportunity for support when the need arises.</p>
<p>In narrative form, briefly state how clients benefited from the core functions or services from this level?</p>	<p>Sagan Na' Homlo is the only Adolescent residential treatment on Guam. In addition, Sagan Na' Homlo offers the individual and family the opportunity</p>
<p>State any commendations to show the strengths of the Program:</p>	

Rehabilitation Services for Adolescents	
June 1, 2014 through June 15, 2014	
Bi-Weekly Reporting Period:	Sanctuary, Inc. Bi-Weekly Progress Report
Task/Activity	
<p>State any recommendations for the improvement of service delivery:</p> <p>II.6 Implement evidence-based models and practices in all levels of care and shall demonstrate the following: In narrative form, state how the activities from II.6.a to II.6.d were implemented and addressed.</p> <p>II.7 Work with DMHSA and its partners to establish a system of care for substance abuse treatment for Asian/Pacific Islanders: Give a brief summary of activities that occurred with DMHSA and its partners during the reporting period.</p> <p>II.8 Ensure all clients receive appropriate screening and assessment for placement into ASAM Levels 0.5, I, II, III.5, and 0.7: Briefly state how sections II.7.a to II.7.e are being addressed.</p> <p>II.9 Provide its staff with opportunities for staff development by performing the following tasks: Briefly state the status of staff members seeking certification with IC & RC and what trainings they attended during the reporting period.</p>	<p>to restructure, refrain and to recover with the challenges of drug and alcohol addiction and eventually re-integrate back into the community as a productive member of society. Sanctuary, Incorporated has implemented Evidence Based Matrix Model incorporating individual sessions, family sessions, early recovery group, relapse prevention group, and 12-step participation.</p> <p>All efforts are channeled in enhancing our working relationship with our community partners and significant agencies.</p> <p>Multi-level Interventions are still considered the best practice. It provides and allows insight, growth, emotional well-being, recognition of strengths, ability to communicate, group and family counseling and the opportunity to share openly, express them-selves and work on problems.</p> <p>Program staff continues to work with Department of Youth Affairs, Guam Public School System (GPSS), Juvenile Drug Court (JDC), Community Substance Abuse Planning & Development (CSAPD) Committee, National Association of Social Workers (NASW) and Association of Individual, Marriage, and Family Therapist (AIMFT) monthly.</p> <p>Ongoing Screening / Assessments continue daily using ASAM to determine Patient Placement Appropriateness.</p> <p>Assessments are ongoing throughout client's treatment episode.</p> <ul style="list-style-type: none"> Sagan Na' Homlo currently has 2 certified ICRC Counselor working with the youth in the inpatient / outpatient programs.

Rehabilitation Services for Adolescents
June 1, 2014 through June 15, 2014

Task/Activity

Sanctuary, Inc. Bi-Weekly Progress Report

Sanctuary Representative:

[Signature]
OJ Taitano
Position Title: Program Director
Date: June 17, 2014

DMHSA Representative:

Received By: *[Signature]*
Position Title: *CPST*
Date of Submission: *6/17/14* *OSQA*

FROM: SANCTUARY, INCORPORATED Drug & Alcohol Residential Treatment Program - Sagan Na' Homlo		Address: 790 Gov. Carlos G. Camacho Rd. Tamuning, Guam 96913	DATE: 6/16/2014
TO: Mr. Ray Vega Director Guam Behavioral Health & Wellness Center (DMHSA)		Vendor Acct. No. S1456001 Document No. Contract No. Job Order No. Purchase Order No. Invoice No. DMHSA-2014-017	
COSTS INCURRED BY CATEGORY		AMOUNT	
1. Personnel		\$	20,336.66
2. Fringe Benefits		\$	2,400.00
3. Contractual		\$	400.00
4. Other		\$	350.00
5. Supplies		\$	1,000.00
6. Utilities		\$	2,180.00

TOTAL PAYMENT REQUEST:

\$ 26,666.66

I CERTIFY that the costs in this Request for Payment are accurate and eligible under the provisions of the Drug & Alcohol Residential Treatment Program - Sagan Na' Homlo and that this is a true and certified original.

Mildred Q. Lujan ^{ML} 06/17/2014
MILDRED Q. LUJAN Date
Sanctuary, Incorporated
Executive Director

Recommended for payment: I certify Invoice No. DMHSA-2014-016 to be true and correct; and that services for June 1-15, 2014 have been rendered; and payment for this period is due.

Don Sabang
D & A Supervisor



SANCTUARY, INCORPORATED

"Helping Youth and Families Help Themselves" since 1971

Address: 406 Maimai Rd., Chalan Pago, Guam 96910 * Tel: 475-7101 * Fax: 477-3117 * Crisis Hotline: 475-7100

Website: www.sanctuaryguam.org * E-mail: inquiries@sanctuaryguam.org



TRANSMITTAL SHEET

TO:

FROM:

Ray Vega

Sanctuary, Inc.

COMPANY:

DATE:

Guam Behavioral Health and Wellness Center

6/3/14

Description

Rehabilitation Services for Adolescents Report

PSR: May 16, 2014-May 31, 2014

*Please sign and return copy to Sanctuary, Incorporated.

Received By:

Name: JENNIFER FARSAVALIE

Title: WPS #

Signature: *J. Farsavalie*

Date: 6/3/14



Sanctuary, Incorporated of Guam

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copy

June 3, 2014

To: Ray Vega
Acting Director
Guam Behavioral Health & Wellness Center

Attn: Don P. Sabang
Drug and Alcohol Supervisor
Guam Behavioral Health & Wellness Center

From: Mildred Q. Lujan
Executive Director
Sanctuary, Incorporated

Re: Rehabilitation Services for Adolescents Report

Attached with this memorandum is the Bi-Weekly Program Status Report for the weeks of May 16, 2014 to May 31, 2014.

If you should have any questions, please feel free to contact myself or OJ Taitano at 475-7101.

Sincerely,


Mildred Q. Lujan
Executive Director

FROM: SANCTUARY, INCORPORATED Drug & Alcohol Residential Treatment Program - Sagan Na' Homlo	Address: 790 Gov. Carlos G. Camacho Rd. Tamuning, Guam 96913	DATE: 5/28/2014
TO: Mr. Ray Vega Director Guam Behavioral Health & Wellness Center (DMHSA)	Vendor Acct. No. S1456001 Document No. Contract No. Job Order No. Purchase Order No. Invoice No. DMHSA-2014-016	
COSTS INCURRED BY CATEGORY		AMOUNT
1. Personnel		\$ 20,336.66
2. Fringe Benefits		\$ 2,400.00
3. Contractual		\$ 400.00
4. Other		\$ 350.00
5. Supplies		\$ 1,000.00
6. Utilities		\$ 2,180.00

TOTAL PAYMENT REQUEST:

\$ ~~26,606.66~~

13,333.38

I CERTIFY that the costs in this Request for Payment are accurate and eligible under the provisions of the Drug & Alcohol Residential Treatment Program - Sagan Na' Homlo and that this is a true and certified original.

Mildred Q. Lujan 05/29/2014
MILDRED Q. LUJAN Date
Sanctuary, Incorporated
Executive Director

Recommended for payment: I certify Invoice No. DMHSA-2014-016 to be true and correct; and that services for May 1 to 31, 2014 have been rendered; and payment for this period is due.

Fa
Don Sabang
D & A Supervisor

Bi-Weekly Reporting Period:

Rehabilitation Services for Adolescents
May 16, 2014 through May 31, 2014

Task/Activity

Sanctuary, Inc. Bi-Weekly Progress Report

11.2 Increase treatment capacity in ASAM Level I Outpatient, known as the "Pathways" program and serve up to twenty (20) adolescents per treatment cycle and shall perform the following tasks: State the number of clients served, as well as those who successfully completed, within the reporting period. If applicable, state the number of clients transferred to another level of care and those on a "wait-list."

During this bi-weekly reporting period:

- 4 group sessions
- 14 participants in attendance [05/17/14(8); 05/31/14 (6)]
- Groups are held on Saturday from 12-2 pm and education groups are held from 2:15 - 3:15 at the Sanctuary, Inc. Main Office.
- Number of Successful Completions: 4
- Number of Clients Transferred to another level of care: 0
- Number of Clients on the Wait List: 9

9 Active Clients NON-DUPLICATE

In narrative form, state how activities from 11.2.a to 11.2.c were implemented and addressed?

The Group lesson/activity was: Daily Schedule and Calendars; Dealing with problems; Freedom Writers; Stages of Recovery; Dealing with feelings of Depression; Sobering Facts about alcohol. Each client was provided the opportunity to discuss each topic.

In narrative form, briefly state how clients benefited from the core functions or services from this level?

Clients are taught to analyze events and change their thoughts and behaviors that lead to substance use and change the results to a more positive behavior that meets their goals. Clients are taught skills to prevent substance use and relapse; are guided in recognizing and planning events that are not associated with substance use; and rewarded for meeting their goals with incentives.

State any commendations to show the strengths of the Program:

The strength of the class based on staff observation, was that each client was able to share in a small group setting and get feedback from peers that support their efforts towards recovery. Clients are able to encourage each other to continue working on their goals and share their experience on what has helped them overcome obstacles. The groups allow the parents and their child to practice new skills and information learned; and provide activities to practice with their families.

State any recommendations for the improvement of service delivery:

Staff to continue our networking efforts with community partners as well as be open to input and feedback. Staff continues to research the latest information through articles, journals, and on-line updates.

11.3 Establish an ASAM Level II Intensive Outpatient treatment program with a treatment capacity of ten (10) adolescents per treatment cycle and shall perform the following tasks: State the number of clients served, as well as those who successfully completed, within the reporting period. If applicable, state the number of clients transferred to another level of care and those on a "wait-

During this bi-weekly reporting period:

- 13 sessions were conducted
- 37 participants in attendance [05/17/14 (6); 05/23/14 (4); 05/24/14 (12); 05/30/14 (6) 5/31/14 (9)]
- Group time identified for Fridays from 3:30 - 4:30pm & 4:30-5:30pm and Saturdays from

Bi-Weekly Reporting Period:

Rehabilitation Services for Adolescents
May 16, 2014 through May 31, 2014

Task/Activity	Sanctuary, Inc. Bi-Weekly Progress Report
<p>list...</p> <p>11.3a Treatment capacity in ASAM Level 0.7 for all individuals who completed level 11. State the number of clients served, as well as those who successfully completed, within the reporting period. If applicable, state the number of clients</p> <p>In narrative form, briefly state how activities from 11.3.a to 11.3.e were implemented and addressed?</p>	<p>12:00pm—3:15pm at the Sanctuary, Inc. Main Office.</p> <ul style="list-style-type: none">• Number of Successful Completions: 0• Number of Clients Transferred to another level of Care: 0• Number of Clients on the Wait List: 3• Active Clients: 6 <p>During this Bi-weekly reporting period:</p> <ul style="list-style-type: none">• 7 Clients in Aftercare (Social Support) Level 0.7• Transfer to another level of Care: 0
<p>In narrative form, briefly state how clients benefited from the core functions or services from this level?</p>	<p>The Group lesson/activity was: weekly check-in; review of group rules; Calendar: Freedom Writer's; Dealing with Problems; Stages of Recovery; Making the Link; Having a Good Time Without Being High; Destructive Behaviors; Big Fish; Triggers; School and Future Goals and Sobering Facts; The Risks of Alcohol Use. Clients were provided with psycho-education for each topic. They were also given the opportunity to share real-life experiences related to each topic and offer feedback to peers for support and process.</p> <p>Participants continue to explore pros and cons for use or staying clean and sober to help them to make informed and well thought out decisions about their use. Small group discussions facilitate understanding of the importance of each topic in recovery. Role-play, rehearsal, repetition, and practice in session help clients to identify strengths and needs. In addition, group participation teaches empathy and helps to develop effective communication skills</p>
<p>State any commendations to show the strengths of the Program:</p> <p>State any recommendations for the improvement of service delivery:</p>	<p>The strength of the small group setting is that it allows for a larger amount of attention, help, and feedback offered to each individual client, thereby encouraging engagement and active participation in their treatment.</p> <p>Staff to continue networking efforts with community partners as well as be open to input and feedback. Staff continues to research the latest information through articles, journals, and on-line updates.</p>

Bi-Weekly Reporting Period:

Rehabilitation Services for Adolescents
 May 16, 2014 through May 31, 2014

Task/Activity

Sanctuary, Inc. Bi-Weekly Progress Report

transferred to another level of care and those on a "wait-list."

Phase Breakdown:

- Orientation:
- Awareness: 2
- Enhancement: 2
- Enlightenment: 1
- Empowerment: 2

During this Bi-weekly reporting period:

- 0 Clients in Aftercare (Social Support) Level 0.7
- Transfer to another level of Care: 0

II.5a Treatment capacity in ASAM Level 0.7 for all individuals who completed level III.5. State the number of clients served, as well as those who successfully completed, within the reporting period. If applicable, state the number of clients

In narrative form, briefly state how activities from II.5 b to II.5 f were implemented and addressed?

Sagan Na' Homlo is a 24/7 structured program where clients participate in a regulated daily routine schedule from morning physical exercises to classroom work, group sessions (i.e. substance abuse, anger management, decision making, relapse prevention, life skills, team building, relationship intelligence; emotional wellness; big book and 12-step education), individual counseling sessions, individual case management sessions, meditation and evening recreation. Sanctuary continues to host 12-Step Meetings; Sanctuary continues to host AI-NON Meetings at our Main Facility and is available to all clients based on desire and appropriateness.

The continuity of treatment in this level of care provides the clients consistent contact with residential staff and the opportunity for support when the need arises.

In narrative form, briefly state how clients benefited from the core functions or services from this level?

State any commendations to show the strengths of the Program:

Sagan Na' Homlo is the only Adolescent residential treatment on Guam. In addition, Sagan Na' Homlo offers the individual and family the opportunity to restructure, refrain and to recover with the challenges of drug and alcohol addiction and eventually re-integrate back into the community as a productive member of society. Sanctuary incorporated has implemented Evidence Based Matrix Model incorporating individual sessions, family sessions, early recovery group, relapse prevention group, and 12-step participation.

State any recommendations for the improvement of service delivery:

All efforts are channeled in enhancing our working relationship with our community partners and significant agencies.

Bi-Weekly Reporting Period:

Rehabilitation Services for Adolescents
May 16, 2014 through May 31, 2014

Task/Activity

Sanctuary, Inc. Bi-Weekly Progress Report

II.6 Implement evidence-based models and practices in all levels of care and shall demonstrate the following: In narrative form, state how the activities from II.6.a to II.6.d were implemented and addressed.

Multi-level interventions are still considered the best practice. It provides and allows insight, growth, emotional well-being, recognition of strengths, ability to communicate, group and family counseling and the opportunity to share openly, express them-selves and work on problems.

II.7 Work with DMHSA and its partners to establish a system of care for substance abuse treatment for Asian/Pacific Islanders: Give a brief summary of activities that occurred with DMHSA and its partners during the reporting period.

Program staff continues to work with Department of Youth Affairs, Guam Public School System (GPSS), Juvenile Drug Court (JDC), Community Substance Abuse Planning & Development (CSAPD) Committee, Community Association of Social Workers (NASW) and Association of Individual Marriage, and Family Therapist (AIMEF) monthly.

II.8 Ensure all clients receive appropriate screening and assessment for placement into ASAM Levels 0.5, I, II, III.5, and 0.7: Briefly state how sections II.7.a to II.7.e are being addressed.

Ongoing Screening / Assessments continue daily using ASAM to determine Patient Placement Appropriateness.

II.9 Provide its staff with opportunities for staff development by performing the following tasks: Briefly state the status of staff members seeking certification with IC & RC and what trainings they attended during the reporting period.

Assessments are ongoing throughout client's treatment episode.

- Sagan Na' Homlo currently has 2 certified ICRC Counselor working with the youth in the inpatient / outpatient programs.
- Case Manager is working toward IC&RC Certification.

Sanctuary Representative:

DMHSA Representative:

OJ Taitano
Position Title: Program Director
Date: April 14, 2014

Received By: 
Position Title: WPS#
Date of Submission: 6/3/14 NSA



Sanctuary, Incorporated of Guam

A Non-profit Organization Established in 1971

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Crisis Hotline (671)475-7100 • Fax (671)477-3117 •

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May 15, 2014

To: Ray Vega
Acting Director
Guam Behavioral Health & Wellness Center

Attn: Don P. Sabang
Drug and Alcohol Supervisor
Guam Behavioral Health & Wellness Center

From: Mildred Q. Lujan
Executive Director
Sanctuary, Incorporated

Re: Rehabilitation Services for Adolescents Report

Attached with this memorandum is the Bi-Weekly Program Status Report for the weeks of May 1, 2014 to May 15, 2014.

If you should have any questions, please feel free to contact myself or OJ Taitano at 475-7101.

Sincerely,

Mildred Q. Lujan
Executive Director

COPY

FROM: SANCTUARY, INCORPORATED Drug & Alcohol Residential Treatment Program - Sagan Na' Homlo	Address: 790 Gov. Carlos G. Camacho Rd. Tamuning, Guam 96913	DATE: 5/15/2014
TO: Mr. Ray Vega Director Guam Behavioral Health & Wellness Center (DMHSA)	Vendor Acct. No. S1456001 Document No. Contract No. Job Order No. Purchase Order No. Invoice No. DMHSA-2014-015	
COSTS INCURRED BY CATEGORY		AMOUNT
1. Personnel		\$ 20,086.00
2. Fringe Benefits		\$ 2,400.00
3. Contractual		\$ 400.00
4. Other		\$ 350.00
5. Supplies		\$ 1,000.00
6. Utilities		\$ 2,180.00

TOTAL PAYMENT REQUEST: \$ 26,416.00

I CERTIFY that the costs in this Request for Payment are accurate and eligible under the provisions of the Drug & Alcohol Residential Treatment Program - Sagan Na' Homlo and that this is a true and certified original

Mildred Q. Lujan 05/14/2014
MILDRED Q. LUJAN Date
Sanctuary, Incorporated
Executive Director

Recommended for payment: I certify Invoice No. DMHSA-2014-015 to be true and correct, and that services for May 1-15, 2014 have been rendered; and payment for this period is due.

Don Sabang
Don Sabang
D & A Supervisor

**Rehabilitation Services for Adolescents
May 1, 2014 through May 15, 2014**

Sanctuary, Inc. Bi-Weekly Progress Report

Bi-Weekly Reporting Period:

Task/Activity

<p>II.2 Increase treatment capacity in ASAM Level I Outpatient, known as the "Pathways" program and serve up to twenty (20) adolescents per treatment cycle and shall perform the following tasks: State the number of clients served, as well as those who successfully completed, within the reporting period. If applicable, state the number of clients transferred to another level of care and those on a "wait-list."</p>	<p>During this bi-weekly reporting period:</p> <ul style="list-style-type: none"> • 6 group sessions • 22 participants in attendance [05/03/14(5); 05/10/14(17);] • Groups are held on Saturday from 12-2 pm and education groups are held from 2:15 – 3:15 at the Sanctuary, Inc. Main Office. • Number of Successful Completions: 0 • Number of Clients Transferred to another level of Care: 0 • Number of Clients on the Wait List: 11 <p>11 Active Clients NON-DUPLICATE</p>
<p>In narrative form, state how activities from II.2.a to II.2.c were implemented and addressed? In narrative form, briefly state how clients benefited from the core functions or services from this level? State any commendations to show the strengths of the Program: State any recommendations for the improvement of service delivery:</p>	<p>The Group lesson/activity was: Daily Schedule and Calendars; alcohol arguments; soft is a heart of a child; I'm not cool without using; Sarah's Quest; Relapse Justification 1; You are here because why. Each client was provided the opportunity to discuss each topic. Clients are taught to analyze events and change their thoughts and behaviors that lead to substance use and change the results to a more positive behavior that meets their goals. Clients are taught skills to prevent substance use and relapse; are guided in recognizing and planning events that are not associated with substance use; and rewarded for meeting their goals with incentives. The strength of the class based on staff observation, was that each client was able to share in a small group setting and get feedback from peers that support their efforts towards recovery. Clients are able to encourage each other to continue working on their goals and share their experience on what has helped them overcome obstacles. The groups allow the parents and their child to practice new skills and information learned; and provide activities to practice with their families. Staff to continue our networking efforts with community partners as well as be open to input and feedback. Staff continues to research the latest information through articles, journals, and on-line updates.</p>
<p>II.3 Establish an ASAM Level II Intensive Outpatient treatment program with a treatment capacity of ten (10) adolescents per treatment cycle and shall perform the following tasks: State the number of clients served, as well as those who successfully completed, within the reporting period. If applicable, state the number of clients transferred to another level of care and those on a "wait-</p>	<p>During this bi-weekly reporting period:</p> <ul style="list-style-type: none"> • 10 sessions were conducted • 23 participants in attendance [05/02/14 (6); 05/03/14 (6); 05/09/14 (2); 05/10/14 (9)] • Group time identified for Fridays from 3:30 – 4:30pm & 4:30-5:30pm and Saturdays from 12:00pm—3:15pm at the Sanctuary, Inc. Main Office.

Rehabilitation Services for Adolescents May 1, 2014 through May 15, 2014	
Bi-Weekly Reporting Period:	Sanctuary, Inc. Bi-Weekly Progress Report
Task/Activity	
list."	<ul style="list-style-type: none"> • Number of Successful Completions: 0 • Number of Clients Transferred to another level of Care: 1 • Number of Clients on the Wait List: 1 • Active Clients: 5
II.3a Treatment capacity in ASAM Level 0.7 for all individuals who completed level II. State the number of clients served, as well as those who successfully completed, within the reporting period. If applicable, state the number of clients	<p>During this Bi-weekly reporting period:</p> <ul style="list-style-type: none"> • 7 Clients in Aftercare (Social Support) Level 0.7 • Transfer to another level of Care: 0
In narrative form, briefly state how activities from II.3.a to II.3.e were implemented and addressed?	<p>The Group lesson/activity was: weekly check-in; review of group rules; Calendar; Scheduling It Is Important; Pros and Cons; Managing down Time; When Did You Start Using; You're Here Because Why; Relapse Justification I; Soft Is the Heart of a Child; Alcohol Arguments; I'm Not Cool If I Don't Use; and D&A Quiz Sara's Quest. Clients were provided with psycho-education for each topic. They were also given the opportunity to share real-life experiences related to each topic and offer feedback to peers for support and process.</p>
In narrative form, briefly state how clients benefited from the core functions or services from this level?	<p>Participants continue to explore pros and cons for use or staying clean and sober to help them to make informed and well thought out decisions about their use. Small group discussions facilitate understanding of the importance of each topic in recovery. Role-play, rehearsal, repetition, and practice in session help clients to identify strengths and needs. In addition, group participation teaches empathy and helps to develop effective communication skills.</p>
State any commendations to show the strengths of the Program:	<p>The strength of the small group setting is that it allows for a larger amount of attention, help, and feedback offered to each individual client, thereby encouraging engagement and active participation in their treatment.</p>
State any recommendations for the improvement of service delivery:	<p>Staff to continue networking efforts with community partners as well as be open to input and feedback. Staff continues to research the latest information through articles, journals, and on-line updates.</p>
MATRIX Model Parent Education / Support Group	<p>During this bi-weekly reporting period:</p>

Rehabilitation Services for Adolescents

May 1, 2014 through May 15, 2014

Task/Activity

Sanctuary, Inc. Bi-Weekly Progress Report

- 2 session were conducted
- Family Members in attendance [(5/3 (4), 5/10 (5)]
- Group time identified for Saturdays from 12:00pm—1:30pm at the Sanctuary, Inc. Main Office.
- Number of Successful Completions: 1
- Number of Clients Transferred to another level of Care: N/A
- Number of Clients on the Wait List: N/A

The group lessons/activities included: Soft is the Heart of a Child and Is This Normal for My Teen. Family members viewed a video on the effects of substance use on the family. Open discussion on each topic followed. Questions, answered, and comments were addressed to close out the sessions.

Small group discussions facilitate understanding of the importance of each topic in recovery. Various examples provided on each topic offer opportunities for family members to reflect on how they could put each topic discussed to use for them. In addition, group participation teaches empathy and helps to develop effective communication skills.

Due to the census of the Family Members wanting to have group on a weekend, accommodations were made moving the group to Saturdays. Each Family member who is not able to attend the groups on Saturdays are still considered and accommodations continue to be made on a case by case basis. Staff to continue networking efforts with community partners as well as be open to input and feedback. Staff continues to research the latest information through articles, journals, and on-line updates.

During this bi-weekly reporting period:

- 7 Clients were served.
- Transfer to another level of Care: 0 (Aftercare)
- Wait Listing: 2

Phase Breakdown:

- Orientation: 1
- Awareness: 3

In narrative form, briefly state how activities from Matrix Parent Education/Support Group were implemented and addressed?

In narrative form, briefly state how Family benefited from the core functions or services from this level?

State any commendations to show the strengths of the Program:

State any recommendations for the improvement of service delivery:

II.5 Maintain treatment capacity in ASAM Level III.5 to serve 6 to 8 adolescents (male or female) at any given time. State the number of clients served, as well as those who successfully completed, within the reporting period. If applicable, state the number of clients transferred to another level of care and those on a "wait-list."

Rehabilitation Services for Adolescents May 1, 2014 through May 15, 2014	
Sanctuary, Inc. Bi-Weekly Progress Report	
Bi-Weekly Reporting Period:	
Task/Activity	
<p>II.5a Treatment capacity in ASAM Level 0.7 for all individuals who completed level III.5. State the number of clients served, as well as those who successfully completed, within the reporting period. If applicable, state the number of clients</p>	<ul style="list-style-type: none"> • Enhancement: 0 • Enlightenment: 1 • Empowerment: 2 <p>During this Bi-weekly reporting period:</p> <ul style="list-style-type: none"> • 0 Clients in Aftercare (Social Support) Level 0.7 • Transfer to another level of Care: 0
<p>In narrative form, briefly state how activities from II.5.b to II.5.f were implemented and addressed?</p>	<p>Sagan Na' Homlo is a 24/7 structured program where clients participate in a regulated daily routine schedule from morning physical exercises to classroom work, group sessions (i.e. substance abuse, anger management, decision making, relapse prevention, life skills, team building, relationship intelligence; emotional wellness, and 12-step education), individual counseling sessions, individual case management sessions, meditation and evening recreation. Sanctuary continues to host ALA-NON meetings and is available to all clients and family members.</p> <p>The continuity of treatment in this level of care provides the clients consistent contact with residential staff and the opportunity for support when the need arises.</p>
<p>In narrative form, briefly state how clients benefited from the core functions or services from this level?</p>	<p>Sagan Na' Homlo is the only Adolescent residential treatment on Guam. In addition, Sagan Na' Homlo offers the individual and family the opportunity to restructure, refrain and to recover with the challenges of drug and alcohol addiction and eventually re-integrate back into the community as a productive member of society. Sanctuary, Incorporated has implemented Evidence Based Matrix Model incorporating individual sessions, family sessions, early recovery group, relapse prevention group, and 12-step participation.</p>
<p>State any recommendations to show the strengths of the Program:</p>	<p>All efforts are channeled in enhancing our working relationship with our community partners and significant agencies.</p>
<p>State any recommendations for the improvement of service delivery:</p>	<p>Multi-level Interventions are still considered the best practice. It provides and allows insight, growth, emotional well-being, recognition of strengths, ability to communicate, group and family counseling and the opportunity to share openly, express them-selves and work on problems.</p>
<p>II.6 Implement evidence-based models and practices in all levels of care and shall demonstrate the following: In narrative form, state how the activities from II.6.a to II.6.d were implemented and addressed.</p>	

Rehabilitation Services for Adolescents
May 1, 2014 through May 15, 2014

Bi-Weekly Reporting Period:

Task/Activity

Sanctuary, Inc. Bi-Weekly Progress Report

II.7 Work with DMHSA and its partners to establish a system of care for substance abuse treatment for Asian/Pacific Islanders: Give a brief summary of activities that occurred with DMHSA and its partners during the reporting period.

II.8 Ensure all clients receive appropriate screening and assessment for placement into ASAM Levels 0.5, I, II, III.5, and 0.7: Briefly state how sections II.7.a to II.7.e are being addressed.

Program staff continues to work with Department of Youth Affairs, Guam Public School System (GPSS), Juvenile Drug Court (JDC), Community Substance Abuse Planning & Development (CSAPD) Committee, National Association of Social Workers (NASW) and Association of Individual, Marriage, and Family Therapist (AIMFT) monthly.

Ongoing Screening / Assessments continue daily using ASAM to determine Patient Placement Appropriateness.

Assessments are ongoing throughout client's treatment episode.

II.9 Provide its staff with opportunities for staff development by performing the following tasks: Briefly state the status of staff members seeking certification with IC & RC and what trainings they attended during the reporting period.

- Sagan Na' Homlo currently has 3 certified ICRC Counselor working with the youth in the inpatient / outpatient programs.
- One counselor is a licensed IMFT Therapist.
- 1 staff continues to work on CEU's that apply towards the ICRC Certification.
- Case Manager is working toward IC&RC Certification.

Sanctuary Representative:

OJ Taitano
 Position Title: Program Director
 Date: April 14, 2014

DMHSA Representative:

Received By: *[Signature]*
 Position Title: WPSA
 Date of Submission: 6/3/14 1:28pm



SANCTUARY, INCORPORATED

"Helping Youth and Families Help Themselves" since 1971

Address: 406 Maimai Rd., Chalan Pago, Guam 96910 * Tel: 475-7101 * Fax: 477-3117 * Crisis Hotline: 475-7100
Website: www.sanctuaryguam.org * E-mail: inquiries@sanctuaryguam.org



TRANSMITTAL SHEET

TO:

FROM:

Ray Vega

Sanctuary, Inc.

COMPANY:

DATE:

Guam Behavioral Health & Wellness Center

4/30/14

Description

RSAR

Status report 4/16/2014-4/30/2014

*Please sign and return copy to Sanctuary, Incorporated.

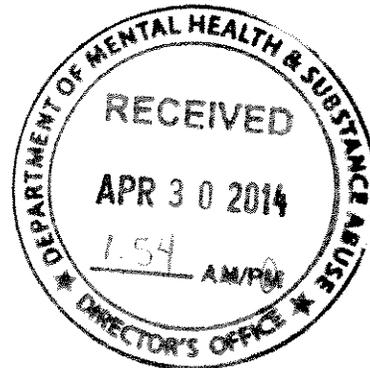
Received By:

Name: Amanda Crawford

Title: DIRECTOR'S OFFICE

Signature: Amanda Crawford

Date: 4/30/14





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Crisis Hotline (671)475-7100 • Fax (671)477-3117 •

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April 30, 2014

To: Ray Vega
Acting Director
Guam Behavioral Health & Wellness Center

Attn: Don P. Sabang
Drug and Alcohol Supervisor
Guam Behavioral Health & Wellness Center

From: Mildred Q. Lujan
Executive Director
Sanctuary, Incorporated

Re: Rehabilitation Services for Adolescents Report

Attached with this memorandum is the Bi-Weekly Program Status Report for the weeks of April 16, 2014 to April 30, 2014.

If you should have any questions, please feel free to contact myself or OJ Taitano at 475-7101.

Sincerely,


Mildred Q. Lujan
Executive Director

FROM: SANCTUARY, INCORPORATED Drug & Alcohol Residential Treatment Program - Sagan Na' Homlo		Address: 790 Gov. Carlos G. Camacho Rd. Tamuning, Guam 96913	DATE: 4/30/2014
TO: Mr. Ray Vega Director Guam Behavioral Health & Wellness Center (DMHSA)		Vendor Acct. No. S1456001 Document No. Contract No. Job Order No. Purchase Order No. Invoice No. DMHSA-2014-014	
COSTS INCURRED BY CATEGORY		AMOUNT	
1. Personnel		\$	20,086.00
2. Fringe Benefits		\$	2,400.00
3. Contractual		\$	400.00
4. Other		\$	350.00
5. Supplies		\$	1,000.00
6. Utilities		\$	2,180.00

TOTAL PAYMENT REQUEST:

\$ 26,416.00

I CERTIFY that the costs in this Request for Payment are accurate and eligible under the provisions of the Drug & Alcohol Residential Treatment Program - Sagan Na' Homlo and that this is a true and certified original.

Mildred Q. Lujan 04/29/2014
MILDRED Q. LUJAN
Sanctuary, Incorporated
Executive Director

Recommended for payment: I certify Invoice No. DMHSA-2014-013 to be true and correct, and that services for April 16-30, 2014 have been rendered, and payment for this period is due.

Don Sabang
D & A Supervisor

Bi-Weekly Reporting Period:

**Rehabilitation Services for Adolescents
April 16, 2014 through April 30, 2014**

Task/Activity

Sanctuary, Inc. Bi-Weekly Progress Report

<p>II.2 Increase treatment capacity in ASAM Level I Outpatient, known as the "Pathways" program and serve up to twenty (20) adolescents per treatment cycle and shall perform the following tasks: State the number of clients served, as well as those who successfully completed, within the reporting period. If applicable, state the number of clients transferred to another level of care and those on a "wait-list."</p>	<p>During this bi-weekly reporting period:</p> <ul style="list-style-type: none">• 6 group sessions• 30 participants in attendance [04/19/14(12); 04/26/14(18);]• Groups are held on Saturday from 12-2 pm and education groups are held from 2:15 – 3:15 at the Sanctuary, Inc. Main Office.• Number of Successful Completions: 0• Number of Clients Transferred to another level of Care: 0• Number of Clients on the Wait List: 6 <p>10 Active Clients NON-DUPLICATE</p>
<p>In narrative form, state how activities from II.2.a to II.2.c were implemented and addressed?</p>	<p>The Group lesson/activity was: Daily Schedule and Calendars; internal triggers; truthfulness; external triggers; anger management; step 1 for adolescents and combined family activity for Families in Recovery. Each client was provided the opportunity to discuss each topic.</p>
<p>In narrative form, briefly state how clients benefited from the core functions or services from this level?</p>	<p>Clients are taught to analyze events and change their thoughts and behaviors that lead to substance use and change the results to a more positive behavior that meets their goals. Clients are taught skills to prevent substance use and relapse; are guided in recognizing and planning events that are not associated with substance use; and rewarded for meeting their goals with incentives.</p>
<p>State any commendations to show the strengths of the Program:</p>	<p>The strength of the class based on staff observation, was that each client was able to share in a small group setting and get feedback from peers that support their efforts towards recovery. Clients are able to encourage each other to continue working on their goals and share their experience on what has helped them overcome obstacles.</p>
<p>State any recommendations for the improvement of service delivery:</p>	<p>Staff to continue our networking efforts with community partners as well as be open to input and feedback. Staff continues to research the latest information through articles, journals, and on-line updates.</p>
<p>II.3 Establish an ASAM Level II Intensive Outpatient treatment program with a treatment capacity of ten (10) adolescents per treatment cycle and shall perform the following tasks: State the number of clients served, as well as those who successfully completed, within the reporting period. If applicable, state the number of clients transferred to another level of care and those on a "wait-list."</p>	<p>During this bi-weekly reporting period:</p> <ul style="list-style-type: none">• 8 sessions were conducted• 40 participants in attendance [04/19/14 (23); 04/25/14 (6); 04/26/14 (11);]• Group time identified for Fridays from 3:30 – 4:30pm & 4:30-5:30pm and Saturdays from 12:00pm—3:15pm at the Sanctuary, Inc. Main Office.• Number of Successful Completions: 2

Bi-Weekly Reporting Period:

Rehabilitation Services for Adolescents
April 16, 2014 through April 30, 2014

Task/Activity

Sanctuary, Inc. Bi-Weekly Progress Report

II.3a Treatment capacity in ASAM Level 0, 7 for all individuals who completed level II. State the number of clients served, as well as those who successfully completed, within the reporting period. If applicable, state the number of clients

During this Bi-weekly reporting period:

- Number of Clients Transferred to another level of Care: 2
- Number of Clients on the Wait List: 3
- Active Clients: 8

In narrative form, briefly state how activities from II.3.a to II.3.e were implemented and addressed?

The Group lesson/activity was: weekly check-in; review of group rules; Calendar; Recreational Activities; Step 1 for Adolescents; School and Future Goals; Treatment Planning; Families in Recovery; Internal Triggers Questionnaire; and Cigarette Arguments. Clients were provided with psycho-education for each topic. They were also given the opportunity to share real-life experiences related to each topic and offer feedback to peers for support and process.

In narrative form, briefly state how clients benefited from the core functions or services from this level?

Participants continue to explore pros and cons for use or staying clean and sober to help them to make informed and well thought out decisions about their use. Small group discussions facilitate understanding of the importance of each topic in recovery. Role-play, rehearsal, repetition, and practice in session help clients to identify strengths and needs. In addition, group participation teaches empathy and helps to develop effective communication skills.

State any commendations to show the strengths of the Program:

The strength of the small group setting is that it allows for a larger amount of attention, help, and feedback offered to each individual client, thereby encouraging engagement and active participation in their treatment.

State any recommendations for the improvement of service delivery:

Staff to continue networking efforts with community partners as well as be open to input and feedback. Staff continues to research the latest information through articles, journals, and on-line updates.

MATRIX Model Parent Education / Support Group

During this bi-weekly reporting period:

- 2 session were conducted
- Family Members in attendance [4/19 (7); 4/26 (5)]

Bi-Weekly Reporting Period:

Rehabilitation Services for Adolescents
April 16, 2014 through April 30, 2014

Task / Activity

Sanctuary, Inc. Bi-Weekly Progress Report

- Group time identified for Saturdays from 12:00pm—1:30pm at the Sanctuary, Inc. Main Office.
- Number of Successful Completions: N/A
- Number of Clients Transferred to another level of Care: N/A
- Number of Clients on the Wait List: N/A

In narrative form, briefly state how activities from Matrix Parent Education/Support Group were implemented and addressed?

The group lessons/activities included: How well is our family functioning and Families in Recovery. Family members viewed a video presentation on the stages of recovery. Open discussion on each topic followed. Questions, answered, and comments were addressed to close out the sessions.

In narrative form, briefly state how Family benefited from the core functions or services from this level?

Small group discussions facilitate understanding of the importance of each topic in recovery. Various examples provided on each topic offer opportunities for family members to reflect on how they could put each topic discussed to use for them and their families. In addition, group participation teaches empathy and helps to develop effective communication skills.

State any commendations to show the strengths of the Program:

Due to the census of the Family Members wanting to have group on a weekend, accommodations were made moving the group to Saturdays. Each Family member who is not able to attend the groups on Saturdays are still considered and accommodations continue to be made on a case by case basis.

State any recommendations for the improvement of service delivery:

Staff to continue networking efforts with community partners as well as be open to input and feedback. Staff continues to research the latest information through articles, journals, and on-line updates.

Bi-Weekly Reporting Period:

Rehabilitation Services for Adolescents
April 16, 2014 through April 30, 2014

Task/Activity

Sanctuary, Inc. Bi-Weekly Progress Report

II.5 Maintain treatment capacity in ASAM Level III.5 to serve 6 to 8 adolescents (male or female) at any given time. State the number of clients served, as well as those who successfully completed, within the reporting period. If applicable, state the number of clients transferred to another level of care and those on a "wait-list."

During this bi-weekly reporting period:

- 8 Clients were served.
- Transfer to another level of Care: 0 (Aftercare)
- Wait Listing: 2

Phase Breakdown:

- Orientation: 2
- Awareness: 2
- Enhancement: 1
- Enlightenment: 2
- Empowerment: 1

II.5a Treatment capacity in ASAM Level 0.7 for all individuals who completed level III.5. State the number of clients served, as well as those who successfully completed, within the reporting period. If applicable, state the number of clients

During this Bi-weekly reporting period:

- 2 Clients in Aftercare (Social Support) Level 0.7
- Transfer to another level of Care: 0

In narrative form, briefly state how activities from II.5.b to II.5.f were implemented and addressed?

Sagan Na' Homlo is a 24/7 structured program where clients participate in a regulated daily routine schedule from morning physical exercises to classroom work, group sessions (i.e. substance abuse, anger management, decision making, relapse prevention, life skills, team building, relationship intelligence; emotional wellness; big book and 12-step education), individual counseling sessions, individual case management sessions, meditation and evening recreation. Sanctuary continues to host AL-NON Meetings at our Main Facility and is available to all clients based on desire and appropriateness.

In narrative form, briefly state how clients benefited from the core functions or services from this level?

The continuity of treatment in this level of care provides the clients consistent contact with residential staff and the opportunity for support when the need arises.

Bi-Weekly Reporting Period:

Rehabilitation Services for Adolescents
April 16, 2014 through April 30, 2014

Task / Activity

Sanctuary, Inc. Bi-Weekly Progress Report

State any commendations to show the strengths of the Program:

Sagan Na' Homlo is the only Adolescent residential treatment on Guam. In addition, Sagan Na' Homlo offers the individual and family the opportunity to restructure, refrain and to recover with the challenges of drug and alcohol addiction and eventually re-integrate back into the community as a productive member of society. Sanctuary, Incorporated has implemented Evidence Based Matrix Model incorporating individual sessions, family sessions, early recovery group, relapse prevention group, and 12-step participation.

State any recommendations for the improvement of service delivery:

All efforts are channeled in enhancing our working relationship with our community partners and significant agencies.

II.6 Implement evidence-based models and practices in all levels of care and shall demonstrate the following: In narrative form, state how the activities from II.6.a to II.6.d were implemented and addressed.

Multi-level Interventions are still considered the best practice. It provides and allows insight, growth, emotional well-being, recognition of strengths, ability to communicate, group and family counseling and the opportunity to share openly, express them-selves and work on problems.

II.7 Work with DMHSA and its partners to establish a system of care for substance abuse treatment for Asian/Pacific Islanders: Give a brief summary of activities that occurred with DMHSA and its partners during the reporting period.

Program staff continues to work with Department of Youth Affairs, Guam Public School System (GPSS), Juvenile Drug Court (JDC), Community Substance Abuse Planning & Development (CSAPPD) Committee, National Association of Social Workers (NASW) and Association of Individual, Marriage, and Family Therapist (AIMEFT) monthly.

II.8 Ensure all clients receive appropriate screening and assessment for placement into ASAM Levels 0,5,1, II, III.5, and 0.7: Briefly state how sections II.7.a to II.7.e are being addressed.

Ongoing Screening / Assessments continue daily using ASAM to determine Patient Placement Appropriateness.
Assessments are ongoing throughout client's treatment episode.

II.9 Provide its staff with opportunities for staff development by performing the following tasks: Briefly state the status of staff members seeking certification with IC & RC and what trainings they attended during the reporting period.

- Sagan Na' Homlo currently has 2 certified ICRC Counselor working with the youth in the inpatient / outpatient programs.
- Case Manager is working toward IC&RC Certification.

Bi-Weekly Reporting Period:

Rehabilitation Services for Adolescents
April 16, 2014 through April 30, 2014

Task/Activity

Sanctuary, Inc. Bi-Weekly Progress Report

Sanctuary Representative:

DMHSA Representative:

OJ Tairano
Position Title: Program Director
Date: April 14, 2014

Received By: _____
Position Title: _____
Date of Submission: _____

Sanctuary, Incorporated

406 MaiMai Road
Chalan Pago, Guam 96910

Invoice

Date	Invoice #
4/14/2014	D2014-013

Bill To
DMHSA Guam Behavioural Health & Wellness 790 Gov. Carlos G. Camacho Road Tamuning, Guam 96913

P.O. No.	Terms	Project
	Net 30	

Quantity	Description	Rate	Amount
	Contribution from Funding Source APR 1-15 2014	26,416.00	26,416.00
		Total	\$26,416.00

Attachment 4

Sanctuary, Incorporated of Guam
Runaway and Homeless Youth Basic Center

Reporting Agency

Department of Youth Affairs

Reports

1. Quarterly financial expenditures and obligation
2. Program progress report



SANCTUARY, INCORPORATED

"Helping Youth and Families Help Themselves" since 1971

Address: 406 Mai Mai Rd., Chalan Pago, Guam 96910

* Tel: 475-7101 * Fax: 477-3117 * Crisis Hotline: 475-7100

Website: www.sanctuaryguam.org * E-mail: inquiries@sanctuaryguam.org



JUL 09 2014

Handwritten initials/signature.

Director's Office

July 9, 2014

To: Adonis Mendiola
Director
Department of Youth Affairs

From: OJ Taitano
Acting Executive Director
Sanctuary, Incorporated of Guam

Re: Program Report

Attached is the quarterly program status report for April 1, 2014 through June 30, 2014.

Should you have any questions, please feel free to contact myself at 475-7101 ext. 119 or Mike Franquez at 475-7101 ext. 116.

Sincerely,

Handwritten signature of OJ Taitano.

OJ Taitano, Acting Executive Director
Sanctuary Incorporated of Guam

June 20, 2014

MEMORANDUM

To: All Staff
From: Executive Director
RE: Acting Executive Director

Hafa Adai:

Please be advised that effective Monday, June 23, 2014, I will be on leave til July 25, 2014. In my absence, I am appointing OJ Taitano Acting Executive Director. Mr. Taitano will be assisted by Mr. Mike Franquez.

Please give your usual support and cooperation extended to OJ and Mike during this time.

Si Yu'os Ma'ase,


Mildred Q. Lujan

FY 2014 RUNAWAY HOMELESS YOUTH (RHY) BASIC CENTER

Department of Youth Affairs

QUARTERLY PERFORMANCE REPORT FORM

ORGANIZATION/AGENCY: Sanctuary Incorporated of Guam	
VENDOR NUMBER: S1456001	
PERSON COMPLETING REPORT: Crystal J. Flores	
TELEPHONE: 475-7113	FAX: 477-3117
REPORT PERIOD: April 1, 2014 to June 30, 2014	DATE OF REPORT: July 9, 2014

Project Description:

The Runaway Homeless Youth (RHY) Basic Center is a community based program specifically designed to assist runaway, homeless, victims of abuse and other similarly troubled youth and their families. The program provides a 24-hour shelter and care as a safe home for runaway, homeless and victims of abuse for up to 30 days during which case management services are provided in resolving their issues of conflict in times of crisis at the same time keeping focus on strengthening the family as a collective unit. The case management unit includes crisis intervention, individual program planning, group and family counseling, aftercare, outreach and referrals. The primary purpose of the program is to 1) provide a viable temporary safe alternative to the natural home, detention center or the streets; and 2) to facilitate the problem solving process of case management by lowering the level of tension in the family to a point in which constructive dialog may begin.

Project Goals and Objectives; Project Activities; Project Performance Measures; Project Outcomes:

<p>Goal: The overall goal of the Basic Center is to provide a safe and stable Emergency Shelter for runaway and troubled youth and assist them in resolving crisis and conflicts by keeping focus on promoting family unity and improving quality of life for Guam's youth.</p> <p>Objective 1. To increase the awareness of available services and issues related to Runaway and Homeless youth and victims of abuse by conducting outreach efforts directed at youth, parents, and community agencies through a 24-hour crisis hotline, presenting information through the local media (newspapers, television & radio), public presentations, bus stop murals, school presentations, door-to-door street outreach, and informational displays at shopping centers throughout the island.</p> <p>Indicator/Outcomes/Periodicity: <i>Awareness of available services for runaway and troubled youth for the community of Guam as a whole.</i></p>	
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<p>Activity A: The Emergency Shelter program will provide individual supportive counseling at least twice a week for each youth residing in the shelter.</p> <p>Time Line: Daily; ongoing daily sessions</p> <p>Responsible Parties: Case Manager and/or Program Director, and Residential Assistants</p>	<p>Results:</p> <ul style="list-style-type: none"> • During, this reporting period, nine (9) youth resided in the shelter during the month of April. Ten (10) youth resided in the shelter during the month of May. Ten (10) youth resided in the month of June. At least One Hundred and Fifty Five (155) individual supportive counseling sessions were conducted that included educational, health and personal growth.
<p>Activity B: To provide therapeutic and recreational activities for youth to promote personal well being.</p> <p>Timeline: Daily</p> <p>Responsible Parties: Case Manager and/or Program Director, and Residential Assistants</p>	<p>Results:</p> <ul style="list-style-type: none"> • On a weekly basis, the program facilitates various support activities for therapeutic and recreational purpose such as life skills to include money management, cooking skills, home management, mentoring, and exercise to promote social skills and personal growth.
<p>Objective II. To increase crisis intervention services to runaway and homeless youth and their families by providing 24 hours services to 200 youth parent and/or community members.</p> <p>Indicators/Outcomes/Periodicity: <i>Accessibility of children and their families in crisis situations who use Emergency Shelter services.</i></p> <p>Activity A: 24-hour crisis hotline is open to the general public to provide immediate feedback, assessments and referrals to appropriate agencies.</p> <p>Time line: on-going,</p> <p>Responsible Parties: Crisis Intervention Worker, Case Manager, and Program Director</p>	<p>Results:</p> <ul style="list-style-type: none"> • One Hundred and Seventy Four (174) contacts were made via 24-hour crisis hotline. • Household and family dynamics, runaway/throwaways, beyond control, physical abuse and sexual abuse were the top issues of concern for youth who accessed the crisis hotline.
<p>Activity B: Provide referral services for all youth and their family members assessed for services needed from other agencies.</p> <p>Timeline: ongoing</p>	<p>Results:</p> <ul style="list-style-type: none"> • An estimation of One Hundred and Eight (108) referrals was made to other agencies, organizations, such as Guam Behavioral Health and Wellness Center (GBHWC), Alee Shelter, Drug and Alcohol services, Guam San Jose, AHRD.

<p>Responsible Parties: Crisis Intervention Worker, Case Manager and Program Director.</p>	
<p>Objective III: To reduce the problems of youth 12-17 who are runaway, homeless and victims of abuse by providing temporary shelter and aftercare services for up to 10 youth at any given time while they resolve problematic issues.</p> <p>Indicators/Outcomes/Periodicity: <i>Accessibility of emergency 24hr placement for runaway and homeless youth needing assistance/guidance to begin the reunification process.</i></p> <p>Activity A: The project will provide temporary shelter and aftercare service for 10 youth 12-17 years of age for up to 30 days while providing the youth with supportive counseling and connecting youth and families with other agencies.</p> <p>Activity B: The project will provide basic necessities such as food, clothing, shelter, and transportation services to and from school and appointments while also providing supportive counseling and guidance to promote reunification and reconciliation.</p> <p>Timeline: ongoing</p> <p>Responsible Parties: Program Director and Case Manager.</p>	<p>Results: During this quarter a total of Thirteen (13) youth received shelter services. There were Five (5) new intakes admitted to shelter, Two (2) youth reentered shelter services two times, Eight (8) youth continued to receive shelter services in the month of March. Seventeen (17) clients continued in aftercare services once reunified with their parent or legal guardian from the month of January to March.</p> <p>During this reporting quarter One (1) client went to foster parents, three (3) clients went to a legal guardian, one (1) client went to Alee Shelter.</p> <p>Results: During this quarter all youth who were admitted into shelter met their basic needs, reunified with familial placement or referred to appropriate agencies or organizations to further meet the youth and family's needs. The Case Manager and Program Director worked with other agencies and organizations to help work towards promoting reunification and reconciliation between the youth and family.</p>
<p>Objective IV</p>	

<p>To strengthen family relationships of 120 youth and their families through individual family and group counseling to resolve conflicts that will lead to familial reconciliation and reunification.</p> <p>Indicators/Outcomes/Periodicity: <i>Conflict Mediation skills of children and their families</i></p> <p>Activity A: Provide 120 family skills training sessions for youth and their families experiencing crisis situations through Sanctuary's 24-hour crisis hotline or Emergency Shelter Program.</p> <p>Time line: ongoing</p> <p>Responsible Parties: Crisis Intervention Worker, Case Manager and Program Director.</p>	<p>Results: Seventeen (17) family skills training sessions were provided this reporting period to youth and their families experiencing crisis. Family sessions were conducted as well to develop a reunification plan. During this quarter all other youth transitioned back home to a parent/legal guardian, alternate familial placement or a foster care home.</p>
<p>Activity B: The Project will conduct 45 Anger Management groups for children in crisis situations to learn assertive, non-violent ways of channeling their anger.</p> <p>Timeline: ongoing</p> <p>Responsible Parties: Program Directors, Case Manager, and AmeriCorps volunteers.</p>	<p>Results:</p> <ul style="list-style-type: none"> • Twelve (12) High School YAM classes were conducted this reporting period with an average of five (5) youth in attendance and were mentored by Sanctuary's AmeriCorps Volunteers during the group session. • Twelve (12) Middle School YAM classes were conducted during this reporting period with an average of Two (2) youth in attendance and were mentored by Sanctuary's AmeriCorps Volunteers during the group session. The group's participants consisted of youth in Sanctuary programs, as well as outside referrals from other agencies such as GDOE, I Famagu'on-ta and Probation.
<p>Objective V: To decrease recidivism and problems of runaway and homeless youth and their families to assist with their transition back home and meet their long-term needs.</p> <p>Indicators/Outcomes/Periodicity: <i>Availability of supportive services to children and their families in crisis situations.</i></p> <p>Activity A: The project will provide individual supportive counseling for 120 youth and their parent/legal</p>	<p>Results: Individual supportive counseling sessions were provided this reporting period to assist youth and their parent/legal guardians to make appropriate decisions relative to their family dynamics. The breakdown of the sessions are as follow:</p> <ul style="list-style-type: none"> - One hundred and seventy four (174) youth individual supportive counseling sessions - Seventeen (17) parent individual

<p>guardians assisting them in making appropriate decisions relative to their family dynamics.</p> <p>Timeline: ongoing</p> <p>Responsible Parties: Program Directors and Case-Manager</p>	<p>supportive counseling sessions - IPP completion rate for this quarter is at 90%</p>
<p>Activity B: The project will provide case management services for 200 youth and their families that will enhance stabilize and strengthen their relationships.</p> <p>Timeline: ongoing</p> <p>Responsible Parties: Program Director and Case Manager</p>	<p>Results: Thirteen (13) youth received case management services via the Co-Ed Shelter and Seventeen (17) participated in Aftercare services.</p>

Problems Encountered:

A challenge encountered is identifying placement in a timely manner for youth who are wards of the state due to exhaustion of alternate familial placement and limited foster care placement. Once a youth exits from shelter services, one of the vital parts in maintaining reunification is to sign up for aftercare services to help reduce the recidivism rate. The youth and parent are always encouraged to sign up for aftercare services to help with the transition back home easier when problems arise. The youth and parent are always given a transitional plan to follow in the event they opt not to seek aftercare services. Further, parent involvement in programs (groups and supportive counseling) is limited; parents do not participate in all the services we recommend despite agreeing to participate and access other services upon intake of client.

Future Plans:

The Case Management and Counseling Section have developed corrective action plans to address several deficiency areas such as improving data collections, monitoring of case management activities and case updates. This improvement is making significant progress on a daily basis. Sanctuary continues to partner with agencies such as Child Protective Services by a holding monthly meeting to discuss ways to better serve clientele.

Performance Measures:

<p>Social Competence</p>	<p>Case Manager and shelter staff have reported observed improvement in social interactions and, defined as maintaining positive relationships with others 10 of 13 (76%) clients served within this reporting period. Observations are based on demeanor and nature of client interactions as documented using daily client progress reports.</p>
<p>Family Relationships</p>	<p>Noted improvements in family relationships, defined as willingness to address family issues, and improved styles of communication, has been reported by case manger for 5 of the 13 (38%) of the clients served this reporting period. Most of the clients during this reporting period were wards of the state. The number provided above only includes clients who were able to work towards reunification with a family member or foster parent. It is challenging to work on a family relationship when a family member or foster parent is not identified. More than 30 days are needed to work on fostering a positive relationship when working with CPS clients and their family members or foster parent.</p>
<p>Families Satisfied with Program</p>	<p>Of the total number of family members who have completed the satisfaction survey 100% have reported to be satisfied with all aspects of the program including a 100% of families stating that they will access Sanctuary services for future familial issues. Areas surveyed include:</p> <ol style="list-style-type: none"> 1) Noted quality in family relationships 2) Future access of services 3) Accessibility and response time 4) Overall rating of services 5) Recommending services to others
<p>Client Satisfaction</p>	<p>Of all clients who have completed satisfaction survey, 80% have reported an increase quality in familial relationships. 80% have stated that they had good or very good access to services with prompt response time. 80% have rated overall services as good or very good and 80% of clients surveyed have indicated that they would very likely refer others to Sanctuary for services needed.</p>



SANCTUARY, INCORPORATED



"Helping Youth and Families Help Themselves" since 1971

Address: 406 Maimai Rd., Chalan Pago, Guam 96910 * Tel: 475-7101 * Fax: 477-3117 * Crisis Hotline: 475-7100
Website: www.sanctuaryguam.org * E-mail: inquiries@sanctuaryguam.org

TRANSMITTAL SHEET

TO:

FROM:

Adonis Mendiola

Sanctuary, Inc.

COMPANY:

DATE:

DYA

7/16/14

Description

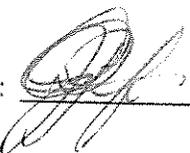
RHY 3rd QTR FY 2014 April 1, 2014-June 30, 2014

*Please sign and return copy to Sanctuary, Incorporated.

Received By:

Name: JENNIFER ARCEO

Title: ADMINISTRATIVE ASSISTANT

Signature: 

Date: 7-16-14



Sanctuary, Incorporated of Guam

A Non-profit Organization Established in 1971

406 MaiMai Road Chalan Pago, Guam 96910 • Administrative Office (671)475-7101
Crisis Hotline (671)475-7100 • Fax (671)477-3117 • Email: sanctuar@ite.net
www.sanctuaryguam.org

CCRF

July 15, 2014

Mr. Adonis Mendiola
Director of Youth Affairs
P.O. Box 236371 GMF
Barrigada, Guam 96921

Dear Mr. Mendiola:

The information listed below is for the Runaway Homeless and Abused Program 3rd quarter of Fiscal Year 2014 from April 1, 2014 – June 30, 2014.

We have listed all expenditures for services and equipment that were \$5,000 or greater.

Services	-0-
Equipment	-0-
Inventory Property	-0-

Please let us know if you have any questions.

Sincerely,


OJ Taitano
Acting Executive Director

FILE

Non Profit Organization Receiving Appropriations from Government of Guam
Pursuant to P.L. 31-77 (Sanctuary, Incorporated)
FY 2014 - (April 1, 2014 - June 30, 2014)
3rd Quarter Expenditure Report
Department of Youth Affairs
Runaway Homeless Program

Fund General	Contract Amount \$ 321,556	Object Classification	Expenditure
		Salary	65,649.74
		Benefits	5,575.94
		Travel (Mileage)	0.00
		Contractual	1,970.08
		Supplies & Materials	1,396.75
		Equipment	0.00
		Utilities	14,388.38
		Miscellaneous	0.00
		Vehicle Lease	0.00
		Grand Total	<u>88,980.89</u>

I CERTIFY THAT THIS IS A TRUE AND CORRECT STATEMENT OF THE EXPENDITURES FOR FISCAL YEAR 2014 FOR THE PROJECT ABOVE.

SIGNATURE OF AUTHORIZED OFFICIAL:



 OJ TAITANO
 ACTING EXECUTIVE DIRECTOR

DATE: 7/16/14

Sanctuary, Incorporated
General Ledger
As of June 30, 2014

	Date	Num	Name	Memo	Account	Debit	Credit	Balance
ACCOUNTS RECEIVABLE								
	10/31/2013	RHY-2014-01	Dept. of Youth Affairs		Accounts Receivable	27,025.07		27,025.07
	11/30/2013	RHY2014-002	Dept. of Youth Affairs		Accounts Receivable	30,763.47		57,788.54
	12/31/2013	RHY2014-003	Dept. of Youth Affairs		Accounts Receivable	39,341.42		97,129.96
	01/31/2014	RHY2014-004	Dept. of Youth Affairs		Accounts Receivable	34,131.82		131,261.78
	02/28/2014	RHY2014-005	Dept. of Youth Affairs		Accounts Receivable	43,248.95		174,510.73
	03/31/2014	RHY2014-006	Dept. of Youth Affairs		Accounts Receivable	58,064.38		232,575.11
	04/30/2014	RHY2014-007	Dept. of Youth Affairs		Accounts Receivable	37,724.64		270,299.75
	05/31/2014	RHY2014-008	Dept. of Youth Affairs		Accounts Receivable	37,783.75		308,083.50
				Total Accounts Receivable		308,083.50	0.00	
SALARIES AND WAGES								
Program Director	10/03/2013	23665	O J Thomas Taitano	Reverse payroll expense 09/25-28/13	Program Director	0.00		308,083.50
	10/17/2013		O J Thomas Taitano		Program Director	242.76		307,840.74
	10/17/2013	AJE	O J Thomas Taitano	Adjustment to correct payroll expense	Program Director	606.90		307,233.84
	10/17/2013	AJE	O J Thomas Taitano	Adjustment to correct payroll expense	Program Director		80.92	307,314.76
	10/31/2013		O J Thomas Taitano		Program Director	242.76		307,072.00
	10/31/2013	AJE	O J Thomas Taitano	Adjustment to correct payroll expense	Program Director	546.21		306,525.79
	10/31/2013	AJE	O J Thomas Taitano	Adjustment to correct payroll expense	Program Director	60.69		306,465.10
	10/31/2013	AJE	O J Thomas Taitano		Program Director		80.92	306,546.02
	11/14/2013		O J Thomas Taitano		Program Director	242.76		306,303.26
	11/14/2013	AJE	O J Thomas Taitano	Adjustment to correct payroll expense	Program Director		101.15	306,404.41
	11/27/2013		O J Thomas Taitano		Program Director	242.76		306,161.65
	11/27/2013	AJE	O J Thomas Taitano	Adjustment to correct payroll expense	Program Director		101.15	306,262.80
	12/12/2013		O J Thomas Taitano		Program Director	242.76		306,020.04
	12/12/2013	AJE	O J Thomas Taitano	Adjustment to correct payroll expense	Program Director		101.15	306,121.19
	12/26/2013		O J Thomas Taitano		Program Director	485.52		305,635.67
	12/26/2013	AJE	O J Thomas Taitano	Adjustment to correct payroll expense	Program Director		343.91	305,979.58
	01/09/2014		O J Thomas Taitano		Program Director	242.76		305,736.82
	01/09/2014	AJE	O J Thomas Taitano	Adjustment to correct payroll expense	Program Director		525.98	305,210.84
	01/23/2014		O J Thomas Taitano		Program Director	242.76		304,968.08
	01/23/2014	AJE	O J Thomas Taitano	Adjustment to correct payroll expense	Program Director		525.98	304,442.10
	02/06/2014		O J Thomas Taitano		Program Director	849.66		303,592.44
	02/06/2014	AJE	O J Thomas Taitano	Adjustment to correct payroll expense	Program Director		80.92	303,673.36
	02/20/2014		O J Thomas Taitano		Program Director	849.66		302,823.70
	02/20/2014	AJE	O J Thomas Taitano	Adjustment to correct payroll expense	Program Director		80.92	302,904.62
	03/07/2014		O J Thomas Taitano		Program Director	849.66		302,054.96
	03/20/2014		O J Thomas Taitano		Program Director	768.74		301,286.22
	04/03/2014		O J Thomas Taitano		Program Director	768.74		300,517.48
	04/17/2014		O J Thomas Taitano		Program Director	768.74		299,748.74
	05/01/2014	AJE	O J Thomas Taitano	Adjustment to reclassify payroll expense	Program Director		4,207.84	303,956.58
	05/01/2014		O J Thomas Taitano		Program Director	222.53		303,734.05
	05/15/2014		O J Thomas Taitano		Program Director	222.53		303,511.52
	05/29/2014		O J Thomas Taitano		Program Director	222.53		303,288.99
	06/12/2014		O J Thomas Taitano		Program Director	222.53		303,066.46
	06/26/2014		O J Thomas Taitano		Program Director	222.53		302,843.93
				Sub-Total Program Director		10,418.45	5,178.88	
Project Coordinator I	10/03/2013		Mamaling R. Reyes		Project Coordinator I	0.00		302,843.93
	10/17/2013		Mamaling R. Reyes		Project Coordinator I	1,007.20		301,836.73
	10/17/2013	AJE	Mamaling R. Reyes	Adjustment to correct payroll expense	Project Coordinator I		578.14	302,415.87
	10/31/2013		Mamaling R. Reyes		Project Coordinator I	1,007.20		301,408.67
	10/31/2013	AJE	Mamaling R. Reyes	Adjustment to correct payroll expense	Project Coordinator I		528.78	301,937.45
	11/14/2013		Mamaling R. Reyes		Project Coordinator I	1,007.20		300,930.25
	11/14/2013	AJE	Mamaling R. Reyes	Adjustment to correct payroll expense	Project Coordinator I		579.14	301,509.39
	11/27/2013		Mamaling R. Reyes		Project Coordinator I	1,007.20		300,502.19
	11/27/2013	AJE	Mamaling R. Reyes	Adjustment to correct payroll expense	Project Coordinator I		579.14	301,081.33
	12/12/2013		Mamaling R. Reyes		Project Coordinator I	1,485.62		299,595.71
	12/12/2013	AJE	Mamaling R. Reyes	Adjustment to correct payroll expense	Project Coordinator I		1,007.20	300,602.91
	12/26/2013		Mamaling R. Reyes		Project Coordinator I	478.42		300,124.49
	01/09/2014		Mamaling R. Reyes		Project Coordinator I	478.42		299,646.07
	01/09/2014	AJE	Mamaling R. Reyes	Adjustment to correct payroll expense	Project Coordinator I		60.36	299,686.43
	01/23/2014		Mamaling R. Reyes		Project Coordinator I	478.42		299,208.01
	01/23/2014	AJE	Mamaling R. Reyes	Adjustment to correct payroll expense	Project Coordinator I		50.36	299,258.37
	02/06/2014		Mamaling R. Reyes		Project Coordinator I	478.42		298,780.95
	02/20/2014		Mamaling R. Reyes		Project Coordinator I	428.06		298,361.89
	03/06/2014		Mamaling R. Reyes		Project Coordinator I	478.42		297,883.47
	03/20/2014		Mamaling R. Reyes		Project Coordinator I	861.30		297,022.17
	04/03/2014		Mamaling R. Reyes		Project Coordinator I	428.06		296,574.11
	04/17/2014		Mamaling R. Reyes		Project Coordinator I	428.06		296,146.05
	05/01/2014	AJE	Mamaling R. Reyes	Adjustment to reclassify payroll expense	Project Coordinator I		763.73	296,929.78
	05/01/2014		Mamaling R. Reyes		Project Coordinator I	478.42		296,451.36
	05/15/2014		Mamaling R. Reyes		Project Coordinator I	478.42		295,972.94
	05/29/2014		Mamaling R. Reyes		Project Coordinator I	478.42		295,494.52
	06/12/2014		Mamaling R. Reyes		Project Coordinator I	478.42		295,016.10
	06/26/2014		Mamaling R. Reyes		Project Coordinator I	580.26		294,435.84
				Sub-Total Project Coordinator I		12,565.94	4,157.85	
Project Assistant II	10/17/2013		Eugene Q. Anderson		Project Coordinator I	386.40		294,049.44
	10/31/2013		Eugene Q. Anderson		Project Coordinator I	386.40		293,663.04
	11/14/2013		Eugene Q. Anderson		Project Coordinator I	388.40		293,274.64
	11/27/2013		Eugene Q. Anderson		Project Coordinator I	386.40		292,888.24
	12/12/2013		Eugene Q. Anderson		Project Coordinator I	386.40		292,501.84
	03/31/2014	AJE	Eugene Q. Anderson	Reverse payroll expense to and reclassify to other program	Project Coordinator I		1,932.00	294,435.84
				Sub-Total Project Assistant II		1,932.00	1,932.00	

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	Date	Num	Name	Memo	Account	Debit	Credit	Balance
Case Manager II	11/14/2013		Joleen Baza		Case Manager II	117.69		294,318.15
	03/31/2014	AJE	Joleen Baza	Reverse payroll expense to and reclassify to other program	Case Manager II		117.69	294,435.84
				Sub-Total Case Manager II		117.69	117.69	
Residential Asst I	11/14/2013		Aidan Carlos A. Rojas		Residential Assistant I	643.83		293,792.01
	11/27/2013		Aidan Carlos A. Rojas		Residential Assistant I	652.93		293,139.08
	11/27/2013		Aidan Carlos A. Rojas	Adjustment to correct payroll expense	Residential Assistant I		619.94	293,759.02
	11/14/2013		Antonio Diaz		Residential Assistant I	234.33		293,524.69
	05/01/2014	AJE	Antonio Diaz	Reverse & reclassify payroll expenses	Residential Assistant I		234.33	293,759.02
	05/10/2014		April R. Gogo		Residential Assistant I	27.30		293,731.72
	05/15/2014		April R. Gogo		Residential Assistant I	573.30		293,158.42
	05/29/2014		April R. Gogo		Residential Assistant I	677.50		292,480.92
	06/12/2014		April R. Gogo		Residential Assistant I	555.10		291,925.82
	06/26/2014		April R. Gogo		Residential Assistant I	423.15		291,502.67
	10/17/2013		Camarin Lujan		Residential Assistant I	728.00		290,774.67
	10/31/2013		Camarin Lujan		Residential Assistant I	364.00		290,410.67
	05/01/2014	AJE	Camarin Lujan	Reverse & reclassify payroll expenses	Residential Assistant I		1,092.00	291,502.67
	10/31/2013		Francisco Cruz I		Residential Assistant I	118.34		291,384.33
	05/01/2014	AJE	Francisco Cruz I	Reverse & reclassify payroll expenses	Residential Assistant I		118.34	291,502.67
	10/17/2013		Georgiana Rae J Almeida		Residential Assistant I	728.00		290,774.67
	10/31/2013		Georgiana Rae J Almeida		Holiday/Overtime	113.75		290,660.92
	10/31/2013		Georgiana Rae J Almeida		Residential Assistant I	728.00		289,932.92
	11/14/2013		Georgiana Rae J Almeida		Holiday/Overtime	85.31		289,847.61
	11/14/2013		Georgiana Rae J Almeida		Residential Assistant I	687.05		289,160.56
	11/27/2013		Georgiana Rae J Almeida		Holiday/Overtime	20.48		289,140.08
	11/27/2013	AJE	Georgiana Rae J Almeida	Adjustment to correct payroll expense	Residential Assistant I	357.18		288,782.90
	11/27/2013		Georgiana Rae J Almeida		Residential Assistant I	357.18		288,425.72
	12/12/2013		Georgiana Rae J Almeida		Holiday/Overtime	95.55		288,330.17
	12/12/2013		Georgiana Rae J Almeida		Residential Assistant I	707.91		287,622.26
	12/12/2013	AJE	Georgiana Rae J Almeida	Adjustment to correct payroll expense	Residential Assistant I		48.15	287,670.41
	12/13/2013		Georgiana Rae J Almeida	holiday pay PPE 12/07/13	Holiday/Overtime	71.66		287,598.75
	12/26/2013		Georgiana Rae J Almeida		Holiday/Overtime	95.55		287,503.20
	12/26/2013		Georgiana Rae J Almeida		Residential Assistant I	634.73		286,868.47
	01/09/2014		Georgiana Rae J Almeida		Holiday/Overtime	278.93		286,589.54
	01/09/2014		Georgiana Rae J Almeida		Residential Assistant I	511.88		286,077.66
	01/23/2014		Georgiana Rae J Almeida		Residential Assistant I	712.08		285,365.58
	02/06/2014		Georgiana Rae J Almeida		Residential Assistant I	702.98		284,662.60
	02/20/2014		Georgiana Rae J Almeida		Residential Assistant I	721.18		283,941.42
	03/06/2014		Georgiana Rae J Almeida		Residential Assistant I	705.25		283,236.17
	03/20/2014		Georgiana Rae J Almeida		Residential Assistant I	685.23		282,550.94
	03/31/2014	AJE	Georgiana Rae J Almeida	Reverse/adj due to UI overpaid PPE 11/09/13	Residential Assistant I		85.31	282,636.25
	04/03/2014		Georgiana Rae J Almeida		Residential Assistant I	693.88		281,942.37
	04/17/2014		Georgiana Rae J Almeida		Residential Assistant I	559.75		281,382.62
	05/01/2014		Georgiana Rae J Almeida		Residential Assistant I	621.08		280,761.54
	05/01/2014		Georgiana Rae J Almeida		Holiday/Overtime	71.66		280,589.88
	05/15/2014		Georgiana Rae J Almeida		Residential Assistant I	696.15		279,893.73
	05/29/2014		Georgiana Rae J Almeida		Residential Assistant I	698.43		279,195.30
	06/12/2014	#	Georgiana Rae J Almeida		Residential Assistant I	728.00		278,467.30
	06/26/2014		Georgiana Rae J Almeida		Residential Assistant I	705.25		277,762.05
	10/17/2013		Janelle S. Lizama		Residential Assistant I	705.25		277,056.80
	10/31/2013		Janelle S. Lizama		Residential Assistant I	648.38		276,408.42
	11/14/2013		Janelle S. Lizama		Residential Assistant I	687.05		275,721.37
	11/27/2013		Janelle S. Lizama		Residential Assistant I	680.23		275,041.14
	11/27/2013		Janelle S. Lizama		Holiday/Overtime	27.30		275,013.84
	12/12/2013		Janelle S. Lizama		Residential Assistant I	687.05		274,326.79
	01/09/2014		Janelle S. Lizama		Residential Assistant I	734.83		273,591.96
	01/09/2014		Janelle S. Lizama		Residential Assistant I	461.83		273,130.13
	01/23/2014		Janelle S. Lizama		Holiday/Overtime	334.43		272,795.70
	02/06/2014		Janelle S. Lizama		Residential Assistant I	728.00		272,067.70
	02/20/2014		Janelle S. Lizama		Residential Assistant I	698.43		271,369.27
	03/06/2014		Janelle S. Lizama		Residential Assistant I	728.00		270,641.27
	03/20/2014		Janelle S. Lizama		Residential Assistant I	712.08		269,929.19
	04/03/2014		Janelle S. Lizama		Residential Assistant I	728.00		269,201.19
	04/17/2014		Janelle S. Lizama		Residential Assistant I	682.50		268,518.69
	05/01/2014		Janelle S. Lizama		Residential Assistant I	728.00		267,790.69
	05/01/2014		Janelle S. Lizama		Residential Assistant I	664.30		267,126.39
	05/01/2014		Janelle S. Lizama		Holiday/Overtime	95.55		267,030.84
	05/15/2014		Janelle S. Lizama		Residential Assistant I	728.00		266,302.84
	05/15/2014		Janelle S. Lizama		Holiday/Overtime	81.90		266,220.94
	05/29/2014		Janelle S. Lizama		Residential Assistant I	728.00		265,492.94
	06/12/2014	#	Janelle S. Lizama		Residential Assistant I	728.00		264,764.94
	06/26/2014		Janelle S. Lizama		Residential Assistant I	728.00		264,036.94
	10/17/2013		John A. Chargualaf		Residential Assistant I	700.70		263,336.24
	10/31/2013		John A. Chargualaf		Residential Assistant I	709.50		262,626.74
	11/14/2013		John A. Chargualaf		Residential Assistant I	705.25		261,921.49
	11/27/2013		John A. Chargualaf		Residential Assistant I	605.15		261,316.04
	12/12/2013		John A. Chargualaf		Residential Assistant I	655.20		260,660.84
	12/26/2013		John A. Chargualaf		Residential Assistant I	699.70		260,051.14
	12/26/2013		John A. Chargualaf		Holiday/Overtime	95.55		259,955.59
	01/09/2014		John A. Chargualaf		Residential Assistant I	600.60		259,354.99
	01/09/2014		John A. Chargualaf		Holiday/Overtime	95.55		259,259.44
	01/23/2014		John A. Chargualaf		Residential Assistant I	682.50		258,576.94
	02/06/2014		John A. Chargualaf		Residential Assistant I	682.50		257,894.44
	02/20/2014		John A. Chargualaf		Residential Assistant I	655.20		257,239.24
	03/06/2014		John A. Chargualaf		Residential Assistant I	687.05		256,552.19
	03/20/2014		John A. Chargualaf		Residential Assistant I	573.30		255,978.89
	04/03/2014		John A. Chargualaf		Residential Assistant I	682.50		255,296.39
	04/17/2014		John A. Chargualaf		Residential Assistant I	675.68		254,620.71
	05/01/2014		John A. Chargualaf		Residential Assistant I	546.00		254,074.71
	05/15/2014		John A. Chargualaf		Residential Assistant I	650.65		253,424.06
	05/21/2014	23917	John A. Chargualaf	Final Pay PPE 05/25/14	Residential Assistant I	104.20		253,319.86
	05/21/2014	23917	John A. Chargualaf	Final Pay PPE 05/25/14	Residential Assistant I	431.43		252,888.43
	10/17/2013		Leinani M. Duenas		Residential Assistant I	705.25		252,178.18
	10/31/2013		Leinani M. Duenas		Residential Assistant I	728.00		251,450.18
	10/31/2013		Leinani M. Duenas		Holiday/Overtime	100.10		251,350.08
	11/14/2013		Leinani M. Duenas		Residential Assistant I	728.00		250,622.08
	11/27/2013		Leinani M. Duenas		Residential Assistant I	702.98		249,919.10
	11/27/2013		Leinani M. Duenas		Holiday/Overtime	20.48		249,898.62
	12/12/2013		Leinani M. Duenas		Residential Assistant I	728.00		249,170.62
	12/26/2013		Leinani M. Duenas		Residential Assistant I	702.98		248,467.64

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12/26/2013		Leinani M. Duenas		Holiday/Overtime	20.48		248,447.16
01/09/2014		Leinani M. Duenas		Residential Assistant I	717.08		247,730.08
05/01/2014		Leinani M. Duenas		Residential Assistant I		717.08	248,447.16
01/23/2014		Leinani M. Duenas		Residential Assistant I	728.00		247,719.16
05/01/2014		Leinani M. Duenas		Residential Assistant I		728.00	248,447.16
02/06/2014		Leinani M. Duenas		Residential Assistant I	718.90		247,728.26
05/01/2014		Leinani M. Duenas		Residential Assistant I		718.90	248,447.16
02/20/2014		Leinani M. Duenas		Residential Assistant I	728.00		247,719.16
05/01/2014		Leinani M. Duenas		Residential Assistant I		728.00	248,447.16
03/06/2014		Leinani M. Duenas		Holiday/Overtime	95.55		248,351.61
05/01/2014		Leinani M. Duenas		Holiday/Overtime		95.55	248,447.16
03/06/2014		Leinani M. Duenas		Residential Assistant I	664.30		247,782.86
05/01/2014		Leinani M. Duenas		Residential Assistant I		664.30	248,447.16
03/20/2014		Leinani M. Duenas		Residential Assistant I	728.00		247,719.16
05/01/2014		Leinani M. Duenas		Residential Assistant I		728.00	248,447.16
11/01/2013		Troy V. Munoz		Residential Assistant I	696.84		247,750.32
05/01/2014		Troy V. Munoz		Residential Assistant I		696.84	248,447.16
06/26/2014 #		Praisleen M. Looney		Residential Assistant I	712.08		247,735.08
			Sub-Total Residential Assistant I		53,975.50	7,274.74	
Residential Assistant II	10/17/2013	Celia D.G. Whitman		Residential Assistant II	772.80		246,962.28
	10/31/2013	Celia D.G. Whitman		Residential Assistant II	697.94		246,264.34
	05/01/2014	Celia D.G. Whitman		Residential Assistant II		1,470.74	247,735.08
	02/20/2014	Celia D.G. Whitman		Residential Assistant II	386.40		247,348.68
	02/20/2014	Celia D.G. Whitman		Residential Assistant II	386.40		246,962.28
	05/01/2014	Celia D.G. Whitman		Residential Assistant II		772.80	247,735.08
	03/06/2014	Celia D.G. Whitman		Holiday/Overtime	65.21		247,669.87
	05/01/2014	Celia D.G. Whitman		Holiday/Overtime		65.21	247,735.08
	03/06/2014	Celia D.G. Whitman		Residential Assistant II	364.67		247,370.41
	05/01/2014	Celia D.G. Whitman		Residential Assistant II	364.67		247,005.74
	05/01/2014	Celia D.G. Whitman		Residential Assistant II		729.34	247,735.08
	03/20/2014	Celia D.G. Whitman		Residential Assistant II	772.80		246,962.28
	05/01/2014	Celia D.G. Whitman		Residential Assistant II		772.80	247,735.08
	04/03/2014	Elynn Rose W. San Miguel		Residential Assistant II	202.86		247,532.22
	04/17/2014	Elynn Rose W. San Miguel		Residential Assistant II	473.34		247,058.88
	05/01/2014	Elynn Rose W. San Miguel		Residential Assistant II	9.66		247,049.22
	05/15/2014	Elynn Rose W. San Miguel		Residential Assistant II	574.77		246,474.45
	05/29/2014	Elynn Rose W. San Miguel		Residential Assistant II	710.01		245,764.44
	06/12/2014 #	Elynn Rose W. San Miguel		Residential Assistant II	304.29		245,460.15
	10/17/2013	Josie Q. Santiago		Residential Assistant II	118.34		245,341.81
	10/31/2013	Josie Q. Santiago		Residential Assistant II	118.34		245,223.47
	11/27/2013	Josie Q. Santiago		Residential Assistant II	118.34		245,105.13
			Total Residential Assistant II		6,440.84	3,810.89	
Residential Assistant III	10/17/2013	Alex F. Cabrera		Residential Assistant III	852.80		244,252.33
	10/31/2013	Alex F. Cabrera		Residential Assistant III	852.81		243,399.52
	11/14/2013	Alex F. Cabrera		Residential Assistant III	230.53		243,168.99
	11/14/2013	Alex F. Cabrera		Residential Assistant III	622.28		242,546.71
	11/27/2013	Alex F. Cabrera		Holiday/Overtime	195.88		242,350.83
	11/27/2013	Alex F. Cabrera		Residential Assistant III	722.22		241,628.61
	12/12/2013	Alex F. Cabrera		Holiday/Overtime	195.88		241,432.73
	12/12/2013	Alex F. Cabrera		Residential Assistant III	722.22		240,710.51
	12/26/2013	Alex F. Cabrera		Residential Assistant III	852.80		239,857.71
	12/27/2013	Alex F. Cabrera	PPE 12/21/13	Residential Assistant III	65.29		239,792.42
	01/09/2014	Alex F. Cabrera		Residential Assistant III	591.63		239,200.79
	01/09/2014	Alex F. Cabrera	Holiday/Overtime	Residential Assistant III	391.76		238,809.03
	01/23/2014	Alex F. Cabrera		Residential Assistant III	852.80		237,956.23
	02/06/2014	Alex F. Cabrera		Residential Assistant III	852.80		237,103.43
	02/20/2014	Alex F. Cabrera		Residential Assistant III	852.40		236,251.03
	02/20/2014	Alex F. Cabrera	Adjustment to correct payroll expense	Residential Assistant III	0.40		236,250.63
	03/06/2014	Alex F. Cabrera		Holiday/Overtime	195.88		236,054.75
	03/06/2014	Alex F. Cabrera		Residential Assistant III	722.22		235,332.53
	03/20/2014	Alex F. Cabrera		Residential Assistant III	852.60		234,479.93
	04/03/2014	Alex F. Cabrera		Residential Assistant III	852.80		233,626.93
	04/17/2014	Alex F. Cabrera		Residential Assistant III	826.82		232,798.11
	05/01/2014	Alex F. Cabrera		Residential Assistant III	876.79		231,921.32
	05/15/2014	Alex F. Cabrera		Residential Assistant III	852.80		231,068.52
	05/29/2014	Alex F. Cabrera		Residential Assistant III	852.80		230,215.72
	06/12/2014 #	Alex F. Cabrera		Residential Assistant III	722.22		229,493.50
	06/26/2014	Alex F. Cabrera		Residential Assistant III	852.80		228,640.70
	10/17/2013	April Joy Q. Aguon		Residential Assistant III	128.63		228,512.07
	10/17/2013	April Joy Q. Aguon		Residential Assistant III	509.60		228,002.47
	10/31/2013	April Joy Q. Aguon		Residential Assistant III	720.20		227,282.27
	11/14/2013	April Joy Q. Aguon		Residential Assistant III	795.60		226,486.67
	11/27/2013	April Joy Q. Aguon		Holiday/Overtime	109.20		226,377.47
	11/27/2013	April Joy Q. Aguon		Residential Assistant III	741.00		225,636.47
	12/12/2013	April Joy Q. Aguon		Residential Assistant III	187.20		225,449.27
	12/12/2013	April Joy Q. Aguon		Residential Assistant III	634.40		224,814.87
	12/26/2013	April Joy Q. Aguon		Holiday/Overtime	78.00		224,736.87
	12/26/2013	April Joy Q. Aguon		Residential Assistant III	824.20		223,912.67
	01/09/2014	April Joy Q. Aguon		Residential Assistant III	777.40		223,135.27
	01/23/2014	April Joy Q. Aguon		Residential Assistant III	751.40		222,383.87
	05/01/2014	April Joy Q. Aguon		Reclass to other prog		1,520.80	223,912.67
	02/06/2014	April Joy Q. Aguon		Residential Assistant III	824.20		223,088.47
	02/20/2014	April Joy Q. Aguon		Residential Assistant III	800.80		222,287.67
	05/01/2014	April Joy Q. Aguon		Reclass to other prog		1,625.00	223,912.67
	03/06/2014	April Joy Q. Aguon		Holiday/Overtime	191.10		223,721.57
	03/06/2014	April Joy Q. Aguon		Residential Assistant III	681.20		223,040.37
	05/01/2014	April Joy Q. Aguon		Reclass to other prog		872.30	223,912.67
	04/03/2014	April Joy Q. Aguon		Residential Assistant III	774.80		223,137.87
	04/17/2014	April Joy Q. Aguon		Residential Assistant III	806.00		222,331.87
	05/01/2014	April Joy Q. Aguon		Reclass to other prog		1,580.80	223,912.67
	10/17/2013	Nelsina N. Mori		Residential Assistant III	832.00		223,080.67
	10/17/2013	Nelsina N. Mori		Holiday/Overtime	7.80		223,072.87
	10/31/2013	Nelsina N. Mori		Residential Assistant III	832.00		222,240.87
	11/14/2013	Nelsina N. Mori		Residential Assistant I	10.40		222,230.47
	11/14/2013	Nelsina N. Mori		Residential Assistant III	821.60		221,408.87
	11/27/2013	Nelsina N. Mori		Residential Assistant III	754.00		220,654.87
	11/27/2013	Nelsina N. Mori		Holiday/Overtime	117.00		220,537.87
	12/12/2013	Nelsina N. Mori		Residential Assistant III	701.48		219,836.39
	12/12/2013	Nelsina N. Mori		Holiday/Overtime	189.54		219,646.85
	12/26/2013	Nelsina N. Mori		Residential Assistant III	832.00		218,814.85
	01/09/2014	Nelsina N. Mori		Residential Assistant III	715.00		218,099.85
	01/09/2014	Nelsina N. Mori		Holiday/Overtime	163.02		217,936.83
	01/23/2014	Nelsina N. Mori		Residential Assistant III	632.00		217,304.83
	02/06/2014	Nelsina N. Mori		Residential Assistant III	832.00		216,472.83
	02/20/2014	Nelsina N. Mori		Residential Assistant III	832.00		215,640.83

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Date	Num	Name	Memo	Account	Debit	Credit	Balance
03/06/2014		Nelsina N. Mori		Residential Assistant III	832.00		214,608.83
03/20/2014		Nelsina N. Mori		Residential Assistant III	798.20		213,810.63
04/03/2014		Nelsina N. Mori		Residential Assistant III	832.00		212,978.63
04/17/2014		Nelsina N. Mori		Residential Assistant III	832.00		212,146.63
05/01/2014		Nelsina N. Mori		Residential Assistant III	800.80		211,345.83
05/15/2014		Nelsina N. Mori		Residential Assistant III	863.20		210,482.63
05/29/2014		Nelsina N. Mori		Residential Assistant III	832.00		209,650.63
05/12/2014 #		Nelsina N. Mori		Residential Assistant III	860.40		208,790.23
05/26/2014		Nelsina N. Mori		Residential Assistant III	832.00		208,158.23
10/17/2013		Sarita Ilesugam		Residential Assistant III	882.40		207,275.83
10/17/2013		Sarita Ilesugam		Holiday/Overtime	4.14		207,271.69
10/31/2013		Sarita Ilesugam		Residential Assistant III	846.55		206,425.14
11/14/2013		Sarita Ilesugam		Residential Assistant I	35.85		206,389.29
11/27/2013		Sarita Ilesugam		Residential Assistant III	882.40		205,506.89
11/27/2013		Sarita Ilesugam		Holiday/Overtime	202.74		205,304.15
12/12/2013		Sarita Ilesugam		Residential Assistant III	747.28		204,556.87
12/12/2013		Sarita Ilesugam		Residential Assistant III	52.39		204,504.48
12/12/2013		Sarita Ilesugam		Holiday/Overtime	153.09		204,351.39
12/26/2013		Sarita Ilesugam		Residential Assistant III	727.98		203,623.41
12/26/2013		Sarita Ilesugam		Residential Assistant III	1,064.96		202,558.45
01/09/2014		Sarita Ilesugam		Residential Assistant III		190.83	202,749.28
01/09/2014		Sarita Ilesugam		Holiday/Overtime	202.74		202,546.54
01/23/2014		Sarita Ilesugam		Residential Assistant III	739.01		201,807.53
02/06/2014		Sarita Ilesugam		Residential Assistant III	882.40		200,925.13
02/20/2014		Sarita Ilesugam		Residential Assistant III	882.40		200,042.73
03/06/2014		Sarita Ilesugam		Residential Assistant III	882.40		199,160.33
03/06/2014		Sarita Ilesugam		Holiday/Overtime	132.40		199,027.93
03/06/2014		Sarita Ilesugam		Residential Assistant III	794.16		198,233.77
03/20/2014		Sarita Ilesugam		Residential Assistant III	882.40		197,351.37
04/03/2014		Sarita Ilesugam		Residential Assistant III	882.40		196,468.97
04/17/2014		Sarita Ilesugam		Residential Assistant III	882.40		195,586.57
05/01/2014		Sarita Ilesugam		Residential Assistant III	882.40		194,704.17
05/15/2014		Sarita Ilesugam		Residential Assistant III	882.40		193,821.77
05/29/2014		Sarita Ilesugam		Residential Assistant III	882.40		192,939.37
06/12/2014 #		Sarita Ilesugam		Residential Assistant III	816.22		192,123.15
06/26/2014		Sarita Ilesugam		Residential Assistant III	882.40		191,240.75
10/17/2013		Teresa M. Perez		Residential Assistant III	744.17		190,496.58
10/17/2013		Teresa M. Perez	Adjustment to correct payroll expense				
10/31/2013	AJE	Teresa M. Perez		Residential Assistant III		339.09	190,835.67
10/31/2013		Teresa M. Perez		Residential Assistant III	389.09		190,446.58
11/14/2013		Teresa M. Perez		Residential Assistant III	47.97		190,398.61
11/14/2013	AJE	Teresa M. Perez	Adj. to correct payroll expense		319.80		190,078.81
12/12/2013		Teresa M. Perez		Residential Assistant III	85.28		189,993.53
				Residential Assistant III	405.08		189,588.45
			Sub-Total Residential Assistant III		61,853.50	6,136.82	
			Total Residential Assistant Salaries		122,069.84	17,222.45	
Residential Supervisor							
10/03/2013		Jeanette M. Tenorio		Residential Supervisor	6.00		189,588.45
10/17/2013		Jeanette M. Tenorio		Residential Supervisor	1,139.20		188,449.25
10/17/2013	AJE	Jeanette M. Tenorio	Adjustment to correct payroll expense			569.60	189,018.85
10/31/2013		Jeanette M. Tenorio		Residential Supervisor	1,139.20		187,879.65
10/31/2013	AJE	Jeanette M. Tenorio	Adjustment to correct payroll expense			569.60	188,449.25
11/14/2013		Jeanette M. Tenorio		Residential Supervisor	1,139.20		187,310.05
11/14/2013	AJE	Jeanette M. Tenorio	Adjustment to correct payroll expense			569.60	187,879.65
11/27/2013		Jeanette M. Tenorio		Residential Supervisor	1,139.20		186,740.45
11/27/2013	AJE	Jeanette M. Tenorio	Adjustment to correct payroll expense			569.60	187,310.05
12/12/2013		Jeanette M. Tenorio		Residential Supervisor	1,139.20		186,170.85
12/12/2013	AJE	Jeanette M. Tenorio		Residential Supervisor		569.60	186,740.45
12/26/2013		Jeanette M. Tenorio		Residential Supervisor	996.80		185,743.65
12/26/2013		Jeanette M. Tenorio		Residential Supervisor		427.20	186,170.85
01/09/2014		Jeanette M. Tenorio		Residential Supervisor	854.40		185,316.45
01/09/2014	AJE	Jeanette M. Tenorio		Residential Supervisor		854.40	186,170.85
01/09/2014	AJE	Jeanette M. Tenorio		Residential Supervisor	1,139.20		185,031.65
01/23/2014		Jeanette M. Tenorio		Residential Supervisor	996.80		184,034.85
01/23/2014	AJE	Jeanette M. Tenorio		Residential Supervisor		142.40	184,177.25
01/23/2014	AJE	Jeanette M. Tenorio		Residential Supervisor		854.40	185,031.65
01/23/2014		Jeanette M. Tenorio		Residential Supervisor	1,139.20		183,892.45
02/06/2014		Jeanette M. Tenorio		Residential Supervisor	1,139.20		182,753.25
02/06/2014		Jeanette M. Tenorio		Residential Supervisor		264.80	183,018.05
02/06/2014	AJE	Jeanette M. Tenorio		Residential Supervisor	284.80		182,733.25
02/20/2014		Jeanette M. Tenorio		Residential Supervisor	854.40		181,878.85
02/20/2014	AJE	Jeanette M. Tenorio		Residential Supervisor		854.40	182,733.25
02/20/2014		Jeanette M. Tenorio		Residential Supervisor	1,139.20		181,614.05
03/06/2014		Jeanette M. Tenorio		Residential Supervisor	854.40		180,759.65
03/06/2014	AJE	Jeanette M. Tenorio		Residential Supervisor	284.80		180,474.85
03/20/2014		Jeanette M. Tenorio		Residential Supervisor	854.40		179,620.45
03/20/2014	AJE	Jeanette M. Tenorio		Residential Supervisor	284.80		179,335.65
04/03/2014		Jeanette M. Tenorio		Residential Supervisor	854.40		178,481.25
04/03/2014	AJE	Jeanette M. Tenorio		Residential Supervisor	284.80		178,196.45
04/17/2014		Jeanette M. Tenorio		Residential Assistant III	1,090.96		177,105.49
05/01/2014		Jeanette M. Tenorio		Residential Assistant III	905.80		176,199.69
05/01/2014		Jeanette M. Tenorio		Holiday/Overtime	269.77		175,929.92
05/15/2014		Jeanette M. Tenorio		Residential Assistant III	1,085.60		174,844.32
05/29/2014		Jeanette M. Tenorio		Residential Assistant III	1,085.60		173,758.72
06/12/2014 #		Jeanette M. Tenorio		Residential Assistant III	1,085.60		172,673.12
6/26/2014 #		Jeanette M. Tenorio		Residential Assistant III	1,085.60		171,587.52
01/09/2014		Mark C. Mesngon		Residential Supervisor	251.60		171,335.92
01/23/2014		Mark C. Mesngon		Residential Supervisor	251.60		171,084.32
03/06/2014		Mark C. Mesngon		Residential Supervisor	251.60		170,832.72
03/20/2014		Mark C. Mesngon		Residential Supervisor	251.60		170,581.12
04/03/2014		Mark C. Mesngon		Residential Supervisor	251.60		170,329.52
04/17/2014		Mark C. Mesngon		Residential Supervisor	264.40		170,065.12
05/01/2014		Mark C. Mesngon		Residential Supervisor	264.40		169,800.72
05/15/2014		Mark C. Mesngon		Residential Supervisor	264.40		169,536.32
05/29/2014		Mark C. Mesngon		Residential Supervisor	264.40		169,271.92
06/12/14 #		Mark C. Mesngon		Residential Supervisor	147.65		169,124.27
			Total Residential Supervisor		26,729.78	6,265.60	
ADMINISTRATIVE STAFF							
10/17/2013		Helen D. S. Onedera		Quality Assurance Officer	696.54		168,427.73
10/17/2013		Helen D. S. Onedera	Rolls: exp to charge other program	Quality Assurance Officer		91.65	168,519.38
10/31/2013		Helen D. S. Onedera		Quality Assurance Officer	696.54		167,822.84

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10/31/2013		Helen D. S. Onedera	Rclss exp to charge other program	Quality Assurance Officer		91.65	167,914.49
11/14/2013		Helen D. S. Onedera		Quality Assurance Officer	696.54		167,217.95
11/14/2013		Helen D. S. Onedera	Rclss exp to charge other program	Quality Assurance Officer		91.65	167,309.60
11/27/2013		Helen D. S. Onedera		Quality Assurance Officer	696.54		166,613.06
11/27/2013		Helen D. S. Onedera	Rclss exp to charge other program	Quality Assurance Officer		91.65	166,704.71
12/12/2013		Helen D. S. Onedera		Quality Assurance Officer	696.54		166,008.17
12/12/2013		Helen D. S. Onedera	Rclss exp to charge other program	Quality Assurance Officer		91.65	166,099.82
12/26/2013		Helen D. S. Onedera		Quality Assurance Officer	696.54		165,403.28
12/26/2013		Helen D. S. Onedera	Rclss exp to charge other program	Quality Assurance Officer		91.65	165,494.93
01/09/2014		Helen D. S. Onedera		Quality Assurance Officer	696.54		164,798.39
01/09/2014		Helen D. S. Onedera	Rclss exp to charge other program	Quality Assurance Officer		91.65	164,890.04
01/23/2014		Helen D. S. Onedera		Quality Assurance Officer	696.54		164,193.50
01/23/2014		Helen D. S. Onedera	Rclss exp to charge other program	Quality Assurance Officer		91.65	164,285.15
02/06/2014		Helen D. S. Onedera		Quality Assurance Officer	696.54		163,588.61
02/06/2014		Helen D. S. Onedera	Rclss exp to charge other program	Quality Assurance Officer		91.65	163,680.26
02/20/2014		Helen D. S. Onedera		Quality Assurance Officer	696.54		162,983.72
02/20/2014		Helen D. S. Onedera	Rclss exp to charge other program	Quality Assurance Officer		91.65	163,075.37
03/07/2014		Helen D. S. Onedera		Quality Assurance Officer	696.54		162,378.83
03/07/2014		Helen D. S. Onedera	Rclss exp to charge other program	Quality Assurance Officer		91.65	162,470.48
03/20/2014		Helen D. S. Onedera		Quality Assurance Officer	696.54		161,773.94
03/20/2014		Helen D. S. Onedera	Rclss exp to charge other program	Quality Assurance Officer		91.65	161,865.59
04/03/2014		Helen D. S. Onedera		Quality Assurance Officer	696.54		161,169.05
04/03/2014		Helen D. S. Onedera	Rclss exp to charge other program	Quality Assurance Officer		91.65	161,260.70
04/17/2014		Helen D. S. Onedera		Quality Assurance Officer	696.54		160,564.16
04/17/2014		Helen D. S. Onedera	Rclss exp to charge other program	Quality Assurance Officer		91.65	160,655.81
05/01/2014		Helen D. S. Onedera		Quality Assurance Officer	604.89		160,050.92
05/15/2014		Helen D. S. Onedera		Quality Assurance Officer	604.89		159,446.03
05/29/2014		Helen D. S. Onedera		Quality Assurance Officer	696.54		158,749.49
10/17/2013		Joseph A. Chargualaf		Maint. Oper. Worker III	458.28		158,291.21
10/31/2013		Joseph A. Chargualaf		Maint. Oper. Worker III	458.28		157,832.93
11/14/2013		Joseph A. Chargualaf		Maint. Oper. Worker III	458.28		157,374.65
11/27/2013		Joseph A. Chargualaf		Maint. Oper. Worker III	458.28		156,916.37
12/12/2013		Joseph A. Chargualaf		Maint. Oper. Worker III	458.28		156,458.09
12/26/2013		Joseph A. Chargualaf		Maint. Oper. Worker III	458.28		155,999.81
01/09/2014		Joseph A. Chargualaf		Maint. Oper. Worker III	458.28		155,541.53
01/23/2014		Joseph A. Chargualaf		Maint. Oper. Worker III	458.28		155,083.25
02/06/2014		Joseph A. Chargualaf		Maint. Oper. Worker III	458.28		154,624.97
02/20/2014		Joseph A. Chargualaf		Maint. Oper. Worker III	458.28		154,166.69
03/06/2014		Joseph A. Chargualaf		Maint. Oper. Worker III	458.28		153,708.41
03/20/2014		Joseph A. Chargualaf		Maint. Oper. Worker III	458.28		153,250.13
04/03/2014		Joseph A. Chargualaf		Maint. Oper. Worker III	458.28		152,791.85
04/17/2014		Joseph A. Chargualaf		Maint. Oper. Worker III	458.28		152,333.57
05/01/2014		Joseph A. Chargualaf		Maint. Oper. Worker III	458.28		151,875.29
05/15/2014		Joseph A. Chargualaf		Maint. Oper. Worker III	458.28		151,417.01
05/29/2014		Joseph A. Chargualaf		Maint. Oper. Worker III	458.28		150,958.73
10/17/2013		Katharine L. Dominguez		Human Resource Manager	753.16		150,205.57
10/31/2013		Katharine L. Dominguez		Human Resource Manager	753.16		149,452.41
11/14/2013		Katharine L. Dominguez		Human Resource Manager	753.16		148,699.25
11/27/2013		Katharine L. Dominguez		Human Resource Manager	753.16		147,946.09
12/12/2013		Katharine L. Dominguez		Human Resource Manager	753.16		147,192.93
12/26/2013		Katharine L. Dominguez		Human Resource Manager	753.16		146,439.77
01/09/2014		Katharine L. Dominguez		Human Resource Manager	753.16		145,686.61
01/23/2014		Katharine L. Dominguez		Human Resource Manager	753.16		144,933.45
02/06/2014		Katharine L. Dominguez		Human Resource Manager	753.16		144,180.29
02/20/2014		Katharine L. Dominguez		Human Resource Manager	753.16		143,427.13
03/07/2014		Katharine L. Dominguez		Human Resource Manager	753.16		142,673.97
03/20/2014		Katharine L. Dominguez		Human Resource Manager	753.16		141,920.81
04/03/2014		Katharine L. Dominguez		Human Resource Manager	753.16		141,167.65
04/17/2014		Katharine L. Dominguez		Human Resource Manager	753.16		140,414.49
05/01/2014		Katharine L. Dominguez		Human Resource Manager	753.16		139,661.33
05/15/2014		Katharine L. Dominguez		Human Resource Manager	753.16		138,908.17
05/29/2014		Katharine L. Dominguez		Human Resource Manager	753.16		138,155.01
10/17/2013		Michael A. Franquez		Facilities Oper. Mgr	642.58		137,512.43
10/31/2013		Michael A. Franquez		Facilities Oper. Mgr	642.58		136,869.85
11/14/2013		Michael A. Franquez		Facilities Oper. Mgr	642.58		136,227.27
11/27/2013		Michael A. Franquez		Facilities Oper. Mgr	642.58		135,584.69
12/12/2013		Michael A. Franquez		Facilities Oper. Mgr	642.58		134,942.11
12/26/2013		Michael A. Franquez		Facilities Oper. Mgr	642.58		134,299.53
01/09/2014		Michael A. Franquez		Facilities Oper. Mgr	642.58		133,656.95
01/23/2014		Michael A. Franquez		Facilities Oper. Mgr	642.58		133,014.37
02/06/2014		Michael A. Franquez		Facilities Oper. Mgr	642.58		132,371.79
02/20/2014		Michael A. Franquez		Facilities Oper. Mgr	642.58		131,729.21
03/07/2014		Michael A. Franquez		Facilities Oper. Mgr	642.58		131,086.63
03/20/2014		Michael A. Franquez		Facilities Oper. Mgr	642.58		130,444.05
04/03/2014		Michael A. Franquez		Facilities Oper. Mgr	642.58		129,801.47
04/17/2014		Michael A. Franquez		Facilities Oper. Mgr	642.58		129,158.89
05/01/2014		Michael A. Franquez		Facilities Oper. Mgr	642.58		128,516.31
05/15/2014		Michael A. Franquez		Facilities Oper. Mgr	642.58		127,873.73
05/29/2014		Michael A. Franquez		Facilities Oper. Mgr	642.58		127,231.15
10/17/2013		Mildred Q. Lujan		Executive Director	1,183.70		126,047.45
10/31/2013		Mildred Q. Lujan		Executive Director	1,183.70		124,863.75
11/14/2013		Mildred Q. Lujan		Executive Director	1,183.70		123,680.05
11/27/2013		Mildred Q. Lujan		Executive Director	1,183.70		122,496.35
12/12/2013		Mildred Q. Lujan		Executive Director	1,183.70		121,312.65
12/26/2013		Mildred Q. Lujan		Executive Director	1,183.70		120,128.95
01/09/2014		Mildred Q. Lujan		Executive Director	1,183.70		118,945.25
01/23/2014		Mildred Q. Lujan		Executive Director	1,183.70		117,761.55
02/06/2014		Mildred Q. Lujan		Executive Director	1,183.70		116,577.85
02/20/2014		Mildred Q. Lujan		Executive Director	1,183.70		115,394.15
03/07/2014		Mildred Q. Lujan		Executive Director	1,183.70		114,210.45
03/20/2014		Mildred Q. Lujan		Executive Director	1,183.70		113,026.75
04/03/2014		Mildred Q. Lujan		Executive Director	1,183.70		111,843.05
04/17/2014		Mildred Q. Lujan		Executive Director	1,183.70		110,659.35
05/01/2014		Mildred Q. Lujan		Executive Director	1,183.70		109,475.65
05/15/2014		Mildred Q. Lujan		Executive Director	1,183.70		108,291.95

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05/29/2014		Mildred O. Lujan		Executive Director	1,183.70		107,108.25
10/17/2013		Robert L. Epstein		Fiscal Officer	923.02		196,185.23
10/31/2013		Robert L. Epstein		Fiscal Officer	923.02		105,262.21
11/14/2013		Robert L. Epstein		Fiscal Officer	923.02		104,339.19
11/27/2013		Robert L. Epstein		Fiscal Officer	923.02		103,416.17
12/12/2013		Robert L. Epstein		Fiscal Officer	923.02		102,493.15
12/26/2013		Robert L. Epstein		Fiscal Officer	923.02		101,570.13
01/09/2014		Robert L. Epstein		Fiscal Officer	923.02		100,647.11
01/23/2014		Robert L. Epstein		Fiscal Officer	923.02		99,724.09
02/06/2014		Robert L. Epstein		Fiscal Officer	923.02		98,801.07
02/20/2014		Robert L. Epstein		Fiscal Officer	923.02		97,878.05
03/07/2014		Robert L. Epstein		Fiscal Officer	923.02		96,955.03
03/20/2014		Robert L. Epstein		Fiscal Officer	923.02		96,032.01
04/02/2014		Robert L. Epstein	FINAL PAYOUT 80 HR A/L	Fiscal Officer	1,943.20		94,088.81
04/03/2014		Robert L. Epstein		Fiscal Officer	923.02		93,165.79
04/17/2014		Robert L. Epstein		Fiscal Officer	194.32		92,971.47
11/27/2013		Teresa M. Perez		Admin Assist. Reg.	405.08		92,566.39
12/26/2013		Teresa M. Perez		Admin Assist. Reg.	405.08		92,161.31
01/09/2014		Teresa M. Perez		Admin Assist. Reg.	405.08		91,756.23
01/23/2014		Teresa M. Perez		Admin Assist. Reg.	405.08		91,351.15
02/06/2014		Teresa M. Perez		Admin Assist. Reg.	405.08		90,946.07
02/20/2014		Teresa M. Perez		Admin Assist. Reg.	405.08		90,540.99
03/06/2014		Teresa M. Perez		Admin Assist. Reg.	405.08		90,135.91
03/20/2014		Teresa M. Perez		Admin Assist. Reg.	405.08		89,730.83
04/03/2014		Teresa M. Perez		Administrative Assistant	405.08		89,325.75
04/17/2014		Teresa M. Perez		Administrative Assistant	405.08		88,920.67
05/01/2014		Teresa M. Perez		Administrative Assistant	405.08		88,515.59
05/15/2014		Teresa M. Perez		Administrative Assistant	405.08		88,110.51
05/29/2014		Teresa M. Perez		Administrative Assistant	405.08		87,705.43
12/12/2013		Toni Marie Perez		Accounting Assistant III	230.24		87,475.19
12/26/2013		Toni Marie Perez		Accounting Assistant III	527.39		86,947.80
01/09/2014		Toni Marie Perez		Accounting Assistant III	546.82		86,400.98
01/23/2014		Toni Marie Perez		Accounting Assistant III	546.82		85,854.16
02/06/2014		Toni Marie Perez		Accounting Assistant III	546.82		85,307.34
02/20/2014		Toni Marie Perez		Accounting Assistant III	546.82		84,760.52
03/06/2014		Toni Marie Perez		Accounting Assistant III	503.24		84,167.28
03/20/2014		Toni Marie Perez		Accounting Assistant III	749.77		83,417.51
04/03/2014		Toni Marie Perez		Accounting Assistant III	546.82		82,870.69
04/17/2014		Toni Marie Perez		Holiday/Overtime	178.12		82,692.57
05/01/2014		Toni Marie Perez		Accounting Assistant III	615.82		82,076.75
05/15/2014		Toni Marie Perez		Accounting Assistant III	634.22		81,442.53
05/29/2014		Toni Marie Perez		Accounting Assistant III	634.22		80,808.31
12/26/2013		Virginia C. Ibay		Accounting Assistant III	634.22		80,174.09
			Adjustment to correct payroll expense	Finance Analyst III	1,741.14		78,432.95
12/26/2013	AJE	Virginia C. Ibay		Finance Analyst III		1,229.04	79,661.99
01/09/2014		Virginia C. Ibay		Finance Analyst III	648.66		79,013.33
01/23/2014		Virginia C. Ibay		Finance Analyst III	648.66		78,364.67
02/06/2014		Virginia C. Ibay		Finance Analyst III	648.66		77,716.01
02/20/2014		Virginia C. Ibay		Finance Analyst III	648.66		77,067.35
03/06/2014		Virginia C. Ibay		Finance Analyst III	776.71		76,290.64
03/20/2014		Virginia C. Ibay		Finance Analyst III	318.33		75,972.31
03/20/2014		Virginia C. Ibay		Finance Analyst III	648.66		75,323.65
04/03/2014		Virginia C. Ibay		Finance Analyst III	648.66		74,674.99
04/17/2014		Virginia C. Ibay		Holiday/Overtime	354.19		74,320.80
05/01/2014		Virginia C. Ibay		Finance Analyst III	747.96		73,572.84
05/15/2014		Virginia C. Ibay		Finance Analyst III	774.44		72,798.40
05/29/2014		Virginia C. Ibay		Finance Analyst III	774.44		72,023.96
			Sub-Total Admin Salaries Total Personnel		<u>100,598.09</u>	<u>2,512.14</u>	<u>71,038.92</u>
					<u>274,431.79</u>	<u>37,386.61</u>	
FRINGE BENEFITS							
FICA							
10/31/2013		FICA Expense - OCT 2013			1,887.47		69,150.85
11/27/2013		FICA Expense - NOV 2013			1,910.71		67,240.14
12/27/2013		FICA Expense - DEC 2013			1,968.28		65,271.86
01/23/2014		FICA Expense - JAN 2014			2,071.63		63,200.23
02/20/2014		FICA Expense - FEB 2014			2,125.96		61,074.27
03/31/2014		FICA Expense - MAR 2014			1,910.00		59,164.27
04/17/2014		FICA Expense - APR 2014			1,952.69		57,211.58
05/29/2014		FICA Expense - MAY 2014			3,042.96		54,168.62
05/29/2014	AJE	Adj to reclass cost allocation				203.84	54,372.46
			Total FICA		<u>16,869.40</u>	<u>203.84</u>	
Health							
10/01/2013	GJ 2014-12	TakeCare Insurance Company, Inc Health Insurance - OCT 2013		Health	1,596.53		52,776.23
11/30/2013	23767	TakeCare Insurance Company, Inc Health Insurance - NOV 2013		Health	1,596.53		51,179.70
12/31/2013	GJ 2014-13	TakeCare Insurance Company, Inc Health Insurance - DEC 2013		Health	1,596.53		49,583.17
03/18/2014	23852	TakeCare Insurance Company, Inc JAN14 Health Insurance ER share		Health	1,963.73		47,619.44
03/27/2014		TakeCare Insurance Company, Inc FEB2014 Health Insurance		Health	1,963.73		45,655.71
		Adjustment to correct health					
03/26/2014	AJE	TakeCare Insurance Company, Inc insurance exp Jan - Feb 2014		Health		734.40	46,390.11
03/28/2014	23937	TakeCare Insurance Company, Inc MAR2014 Health Insurance		Health	1,596.53		44,793.58
04/30/2014	23938	TakeCare Insurance Company, Inc APR2014 Health Insurance		Health	1,426.00		43,367.58
05/01/2014	AJE	TakeCare Insurance Company, Inc Adjustment to reclass exp allocation		Health		2,093.86	45,461.44
05/19/2014	Invoice	TakeCare Insurance Company, Inc MAY2014 Health Insurance		Health	1,132.13		44,329.31
			TOTAL Health Insurance		<u>12,871.71</u>	<u>2,828.26</u>	
Workman's Comp							
12/01/2013	23762	AM Insurance 2007	DEC2013 Insurance	Worker's Comp	53.31		44,276.00
01/01/2014	23823	AM Insurance 2007	JAN2014 General Insurance	Worker's Comp	53.31		44,222.69
02/01/2014	23835	AM Insurance 2007	FEB2014 General Insurance	Worker's Comp	53.31		44,169.38
03/01/2014	MAR2014	AM Insurance 2007	MAR2014 General Insurance	Worker's Comp	53.31		44,116.07
04/01/2014	APR014	AM Insurance 2007	APR2014 General Insurance	Worker's Comp	53.31		44,062.76
05/01/2014	MAY2014	AM Insurance 2007	MAY2014 General Insurance	Worker's Comp	53.31		44,009.45
			TOTAL WORKMAN'S COMPENSATION		<u>319.86</u>	<u>0.00</u>	
			Total Fringe Benefits		<u>30,660.97</u>	<u>3,032.10</u>	
			Total Personnel Salaries & Benefits		<u>304,492.76</u>	<u>40,418.71</u>	
CONTRACTUAL & OTHER SERVICES							
02/12/2014		court clearances	Superior Court of Guam	court clearances	Police/Court Clearance	140.00	43,869.45
02/12/2014		traffic clearance	Superior Court of Guam	traffic clearance	Police/Court Clearance	75.00	43,794.45
05/22/2014	23920	Crystal Flores	health certificate reimbursement(Joe C)	Police/Court Clearance	10.00		43,784.45
			Subtotal: Police/Court Clearance		<u>225.00</u>	<u>0.00</u>	

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Date	Num	Name	Memo	Account	Debit	Credit	Balance
12/01/2013	23762	AM Insurance 2007	property, vehicle, gen liab, D&O, workers, prof. liab, personal accident, auto	Insurance	1,051.00		42,733.45
01/01/2014	23823	AM Insurance 2007	property, vehicle, gen liab, D&O, Workers, Prof Liab., Personal accident, auto	Insurance	1,051.00		41,682.45
02/01/2014	3rd installment	AM Insurance 2007	workers, prof liab, personal accident, auto	insurance	1,051.00		40,631.45
03/01/2014	AJE	AM Insurance 2007	Adjustment overstated costs allocation Dec13 to Feb14	Insurance		337.86	40,969.31
03/01/2014	4th Installment	AM Insurance 2007	4th Installment	Insurance	938.38		40,030.93
04/01/2014	5th Installment	AM Insurance 2007	5th Installment	Insurance	938.38		39,092.55
05/01/2014	AJE	AM Insurance 2007	Adj to reclass cost allocation	Insurance		554.05	39,646.60
05/01/2014	MAY2014	AM Insurance 2007	MAY2014	Insurance	479.81		39,166.79
05/02/2014	23908	Crystal Flores	Replenishment of Rec Fund	Client Fund	197.30		38,969.49
05/22/2014	23920	Crystal Flores	client expenses	Client Fund	80.46		38,889.03
05/22/2014	23920	Crystal Flores	science studies fair	Social Development	22.50		38,867.03
03/26/2014	23875	Joseph E. Foster	Joelyn & Helen	Staff	100.00		38,767.03
03/26/2014	23875	Joseph E. Foster	Crystal	Staff	250.00		38,517.03
10/04/2013	23890	One-Pacific (Guam), Inc.	JLizama Sep13 Drug Test	Drug Test	0.90		38,517.03
01/23/2014	Invoice 1/14SI	PNG, Inc.	Invoice 1/14SI	Staff	44.00		38,473.03
01/08/2014	Registration Renewa	Treasurer of Guam	Vehicle Registration Renewa	Licenses			
12/01/2013	23889	Xerox Corporation	UMA3498		95.00		38,378.03
01/01/2014	071938372	Xerox Corporation	10/21/13-11/21/13		358.12		38,019.91
02/01/2014	072444650	Xerox Corporation	071938372		275.62		37,744.29
03/01/2014	072901712	Xerox Corporation	072444650		241.93		37,502.46
04/01/2014	073395230	Xerox Corporation	072901712		284.65		37,217.81
05/01/2014	INV# 073900159	Xerox Corporation	073395230		320.43		36,897.38
			INV# 073900159	Xerox	195.58		36,701.80
			Subtotal: Contractual Others		7,974.56	891.91	
Shelter	10/09/2013	23674	Willie's Appliance Home Service	Repair Kenmore washing machine in			
	12/18/2013	23741	Barnett Plumbing	COED; agitator and coupling	Shelter	150.00	36,551.80
	01/21/2014	23792	ERC Maintenance	Inv# 36859	Shelter	169.63	36,382.17
	01/21/2014	23792	ERC Maintenance	INV#9627 blower repair	Shelter	38.49	36,343.68
	01/21/2014	23792	ERC Maintenance	INV#9628 chainsaw repair	Shelter	43.49	36,300.19
	04/07/2014	10058755	Guam Home Center	supplies for clothesline coed shelter	Shelter	72.22	36,227.97
	04/25/2014	23901	Willie's Appliance Home Service	Repair of kenmore washer for coed shelter	Shelter		
					95.00		36,132.97
			Subtotal: R & M - Shelter		568.83	0.00	
Vehicle	10/03/2013	23657	Anthony Crisostomo	Repair COED van brake system	Vehicle	350.00	35,782.97
	05/28/2014	oil & filter change	One Stop Auto Care	Toyota Tacoma	Vehicle	42.95	35,740.02
			Subtotal: R & M - Vehicle		392.95	0.00	
Cable	10/01/2013	INV#4155800/OCT1	Docomo Pacific	INV#4155800/OCT13	Cable	57.95	35,682.07
	11/01/2013	INV#4184392/NOV1	Docomo Pacific	INV#4184392/NOV13	Cable	57.95	35,624.12
	12/01/2013	INV#4212832/DEC1	Docomo Pacific	INV#4212832/DEC13	Cable	57.95	35,566.17
	01/01/2014	INV#4241252/JAN1	Docomo Pacific	INV#4241252/JAN14	Cable	57.95	35,508.22
	02/01/2014	INV#4269750/FEB1	Docomo Pacific	INV#4269750/FEB14	Cable	57.95	35,450.27
	03/01/2014	INV#4297798/MAR1	Docomo Pacific	INV#4297798/MAR14	Cable	57.95	35,392.32
			Subtotal: Cable		347.70	0.00	
Website	12/06/2013	23742	Bank of Guam	Acct# 6895 SDA DEC13	Website	105.00	35,287.32
	02/03/2014	23800	Bank of Guam	Website 12/13-01/14	Website	70.00	35,217.32
	02/26/2014	Inv#6895 FEB2014	Bank of Guam	Inv#6895 FEB2014	Website	35.00	35,182.32
	04/03/2014	23892	Bank of Guam	Acct#6895/February 2013	Website	35.00	35,147.32
	05/06/2014	Stmt Dtd 05/23/14	Bank of Guam	CTC Website	Website	35.00	35,112.32
			Subtotal: Website		280.00	0.00	
			Total Contractual & Other Services		9,799.04	891.91	
SUPPLIES							
Food	10/01/2013	23715	Pepsi Cola Bottling Co. of Guam, Inv# 249420		Food	46.00	35,066.32
	10/09/2013	23715	Pepsi Cola Bottling Co. of Guam, Inv# 249561		Food	51.75	35,014.57
	10/16/2013	23715	Pepsi Cola Bottling Co. of Guam, Inv# 249564		Food	51.75	34,962.82
	10/29/2013	23715	Pepsi Cola Bottling Co. of Guam, Inv# 249558		Food	74.75	34,888.07
	11/07/2013	23860	Pepsi Cola Bottling Co. of Guam, Inv# 249999		Food	74.75	34,813.32
	11/19/2013	23860	Pepsi Cola Bottling Co. of Guam, Inv# 250174		Food	69.00	34,744.32
	11/27/2013	23860	Pepsi Cola Bottling Co. of Guam, Inv# 250362		Food	51.75	34,692.57
	12/13/2013	23885	Pepsi Cola Bottling Co. of Guam, Inv# 250772		Food	69.00	34,623.57
	12/18/2013	23885	Pepsi Cola Bottling Co. of Guam, Inv# 250907		Food	57.50	34,566.07
	12/31/2013	23885	Pepsi Cola Bottling Co. of Guam, Inv# 251090		Food	57.50	34,508.57
	01/09/2014	23885	Pepsi Cola Bottling Co. of Guam, Inv# 251311		Food	51.24	34,457.33
	01/12/2014	23885	Pepsi Cola Bottling Co. of Guam, Inv# 251506		Food	48.74	34,408.59
	01/31/2014	23885	Pepsi Cola Bottling Co. of Guam, Inv# 251720		Food	47.28	34,361.31
	02/12/2014	23885	Pepsi Cola Bottling Co. of Guam, Inv# 251906		Food	54.36	34,306.95
	02/21/2014	23885	Pepsi Cola Bottling Co. of Guam, Inv# 252048		Food	42.28	34,264.67
			Reclass expense to EFS 31				
			Inv#250772/250907/251090/251311/251506/251720/251906/252048			427.90	
	03/01/2014	AJE	Pepsi Cola Bottling Co. of Guam, 251506/251720/251906/252048	Food			34,892.57
	03/13/2014	252338	Pepsi Cola Bottling Co. of Guam, 252338	Food	60.40		34,832.17
	03/21/2014	252750	Pepsi Cola Bottling Co. of Guam, 252750	Food	54.36		34,777.81
	04/03/2014	252985	Pepsi Cola Bottling Co. of Guam, 252985	Food	72.48		34,705.33
	04/10/2014	253163	Pepsi Cola Bottling Co. of Guam, 253163	Food	54.36		34,650.97
	04/21/2014	253381	Pepsi Cola Bottling Co. of Guam, 253381	Food	72.48		34,578.49
	05/21/2014	254092	Pepsi Cola Bottling Co. of Guam, 254092	Food	66.44		34,512.05
			Subtotal: Food		1,228.17	427.90	
Office	12/02/2013	23706	Standard Office Supplies	Inv#265822 /Purch 4bxs Manila Folders	Office	14.61	34,297.44
	12/02/2013	23707	Guam Modern Office Supply	Purchase of receipt book	Office	9.04	34,288.40
	01/28/2014	23798	Luen Fung	Inv#1728796 Purch 2bxs Copy Paper	Office	34.20	34,254.20
	03/10/2014	23848	Micronesia Guam, Inc.	Inv#009 Purch 3bx Copy Papers	Office	37.00	34,217.20
	04/14/2014	copier paper	Luen Fung	purchase of copier paper	Office	36.00	34,181.20
	04/24/2014	56260	Pay-Less Markets Inc.	56260	Office	32.76	34,148.44
	04/25/2014	23900	Standard Office Supplies	HP 901XL Black in copier paper	Office	13.00	34,135.44
	05/19/2014		Luen Fung		Office	36.00	34,099.44
			Subtotal: Office		212.61	0.00	
Program	10/21/2013	23695	Micronesia Guam, Inc.	Inv# 005/Purch 2bx Copy Paper	Program	37.00	34,062.44
	11/14/2013	23695	Micronesia Guam, Inc.	Inv#006/Purch 3bxs copier paper (10ms/c)	Program	37.00	34,025.44
	12/12/2013	23740	Luen Fung	Purchase supplies for shelter	Shelter	15.46	34,009.98
	12/17/2013	23738	Micronesia Guam, Inc.	Purch 3bxs copier paper (10/1bx)	Program	37.00	33,972.98
	12/20/2013	23889	Xerox Corporation	Inv# 071630656 Supply & Maintenance Costs	Program	78.26	33,894.72

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	<u>Date</u>	<u>Num</u>	<u>Name</u>	<u>Memo</u>	<u>Account</u>	<u>Debit</u>	<u>Credit</u>	<u>Balance</u>
	12/24/2013	23752	Quality Distributors	supplies for shelter	Shelter	41.00		33,853.72
	01/28/2014	23797	Quality Distributors	supplies shelter	Shelter	82.00		33,771.72
				Inv#1737989 Purch Copy				
	02/25/2014	23838	Luen Fung	Paper2bxs	Program	34.20		33,737.52
				Inv#073091097 supplies & maintenance cost				
	03/20/2014	Inv# 073091097	Xerox Corporation		Program	76.59		33,660.93
	03/31/2014	23740	Luen Fung	Purchase supplies for shelter	Shelter		15.46	33,676.99
				Reclass to Shelter expense -				
	03/31/2014	23752	Quality Distributors	supplies for shelter	Shelter		41.00	33,717.99
				Reclass to Shelter expense -				
	03/31/2014	23797	Quality Distributors	supplies for shelter	Shelter		82.00	33,799.99
	06/06/2014	Sint Dtd 05/23/14	Bank of Guam	Credit Card Acct# 6895/April 2014	Program	35.28		33,764.11
				Subtotal: Program		473.79	138.46	
Shelter	12/12/2013	23740	Luen Fung	Purchase supplies for shelter	Shelter	15.46		33,748.65
	12/24/2013	23752	Quality Distributors	supplies for shelter	Shelter	41.00		33,707.65
	01/20/2014	23797	Quality Distributors	supplies shelter	Shelter	82.00		33,625.65
	03/14/2014	23851	Benson Guam, Enterprises	Maintenance supplies - trash bins	Shelter	55.57		33,570.08
	03/17/2014	997856	Benson Guam, Enterprises	supplies to fabricate trash bins	Shelter	24.24		33,545.84
	05/20/2014	23663	Luen Fung	paper towel & toilet paper	Shelter	42.69		33,503.15
	03/25/2014	23870	ERC Trading	Purchase Clotheshline Materials	Shelter	25.99		33,477.16
	03/25/2014	23872	Benson Guam, Enterprises	Purchase Clotheshline Materials	Shelter	34.53		33,442.63
	04/15/2014	56033	Pay-Less Markets Inc.	56033	Shelter	68.22		33,374.41
	05/13/2014		Benson Guam, Enterprises	shelter cleaning supplies	Shelter	68.39		33,306.02
	05/22/2014		Luen Fung	shelter supplies	Shelter	93.00		33,213.02
	05/22/2014	23920	Crystal Flores	packing tape, poster boards	Shelter	13.37		33,199.65
				Subtotal: Shelter		564.46	0.00	
Gasoline	10/09/2013	23668	IP & E Guam	Card# UMA3498 AUG 13	Gasoline	0.00		33,199.65
	10/09/2013	23668	IP & E Guam	Card# Corporate3 AUG 13	Gasoline	0.00		33,199.65
	10/08/2013	23668	IP & E Guam	Adj overstated DYA fuel costs	Gasoline		0.00	33,199.65
	10/31/2013	23763	IP & E Guam	Card# Corporate3 OCT12013	Gasoline	854.44		32,346.21
	10/31/2013	23763	IP & E Guam	Card# UMA3498 OCT2013	Gasoline	545.36		31,800.85
	10/31/2013	23763	IP & E Guam	Adj overstated DYA fuel cost	Gasoline		754.62	32,555.47
	11/30/2013	23822	IP & E Guam	Card# UMA3498 NOV13	Gasoline	213.97		32,341.50
	11/30/2013	23822	IP & E Guam	Card# Corporate3 NOV13	Gasoline	50.74		32,290.76
	12/31/2013	23842	IP & E Guam	Card# UMA3498 DEC13	Gasoline	130.59		32,160.17
	12/31/2013	23842	IP & E Guam	Card# Corporate3 DEC13	Gasoline	51.41		32,108.76
	01/31/2014	23883	IP & E Guam	Card# UMA3498 JAN2014	Gasoline	280.07		31,828.69
	01/31/2014	23883	IP & E Guam	Card# 7052PDE JAN2014	Gasoline	141.40		31,687.29
	02/28/2014	23909	IP & E Guam	Inv#228141743 FEB2014	Gasoline	343.95		31,343.34
	03/31/2014	23909	IP & E Guam	Inv#331141743 MAR2014	Gasoline	514.62		30,828.72
	04/30/2014	23909	IP & E Guam	Inv#331141743 APR2014	Gasoline	371.08		30,457.64
	05/31/2014	Inv#531141743	IP & E Guam	Inv#531141743 MAY2014	Gasoline	363.89		30,093.75
				Subtotal: Gasoline		3,860.52	754.62	
				Total Supplies		6,339.55	1,320.98	
UTILITIES								
Fax	10/01/2013	99124 OCT2013	IT & E	OCT13 Acct# 99124/fax service	Fax	3.33		30,090.42
	11/01/2013	99124 NOV2013	IT & E	NOV13 Acct# 99124/fax service	Fax	3.33		30,087.09
	12/01/2013	99124 DEC2013	IT & E	DEC13 Acct# 99124/fax service	Fax	3.33		30,083.76
	01/01/2014	99124 JAN14	IT & E	JAN14 Acct#99124/fax service	Fax	3.33		30,080.43
	02/01/2014	99124 FEB14	IT & E	FEB14 Acct# 99124/fax service	Fax	3.33		30,077.10
	03/01/2014	99124 MAR14	IT & E	MAR14 Acct# 99124/fax service	Fax	3.33		30,073.77
	04/01/2014	Acct#99124/ APR2014	IT & E	APR2014 Acct#99124/fax service	Fax	3.34		30,070.43
	05/01/2014	Inv# 845325/MAY2(IT & E		INV# 845325/MAY2014	Fax	3.33		30,067.10
				Subtotal: Fax		26.65	0.00	
Internet	10/01/2013	INV#4155800/OCT13	Docomo Pacific	INV#4155800/OCT13	Internet	300.02		29,767.08
	11/01/2013	INV#4184382/NOV13	Docomo Pacific	INV#4184382/NOV13	Internet	300.02		29,467.06
	12/01/2013	INV#4212832/DEC13	Docomo Pacific	INV#4212832/DEC13	Internet	300.02		29,167.04
	01/01/2014	INV#4241252/JAN14	Docomo Pacific	INV#4241252/JAN14	Internet	300.02		28,867.02
	02/01/2014	INV#4269750/FEB14	Docomo Pacific	INV#4269750/FEB14	Internet	300.02		28,567.00
	03/01/2014	INV#4297798/MAR14	Docomo Pacific	INV#4297798/MAR14	Internet	300.02		28,266.98
	04/01/2014	INV#4326005/APR14	Docomo Pacific	INV#4326005/APR14	Internet	299.98		27,967.00
	05/01/2014	Inv# 4353779/MAY2	Docomo Pacific	Inv# 4353779/MAY2014	Internet	299.98		27,667.02
				Subtotal: Internet		2,400.08	0.00	
Long Distance	02/01/2014	137856	IT & E	#137856 / LONG DISTANCE	Long Distance	112.25		27,554.77
	03/01/2014	137853	IT & E	137853 long distance	Long Distance	140.84		27,413.93
	04/01/2014	Acct# 137853 APR14	IT & E	Acct# 137853 APR14	Long Distance	86.25		27,327.68
	05/01/2014	Acct# 137853/MAY2	IT & E	Acct# 137853/MAY2014	Long Distance	105.97		27,221.71
				Subtotal: Long Distance		445.31	0.00	
Telephone	11/01/2013	23778	Guam Telephone Authority	BUS-11109214/NOV2013	Telephone	765.10		26,456.61
	12/01/2013	23778	Guam Telephone Authority	BUS-111109214/DEC13	Telephone	750.28		25,706.33
	01/01/2014	23849	Guam Telephone Authority	BUS-111109214/JAN2014	Telephone	350.29		25,356.04
				BUS-111109214/JAN2014/adj to correct allocation				
	01/01/2014	23849	Guam Telephone Authority	BUS-111109214/FEB2014	Telephone	411.58		24,944.46
	02/01/2014	BUS-111109214	Guam Telephone Authority	BUS-111109214/FEB2014/adj to correct allocation	Telephone	575.75		24,368.71
	02/01/2014	BUS-111109214	Guam Telephone Authority	BUS-111109214/MAR2014	Telephone	651.90		23,716.81
	03/01/2014	BUS-111109214	Guam Telephone Authority	BUS-111109214/APR14	Telephone	774.50		22,942.31
	04/01/2014	Inv# 7195727 APR14	Guam Telephone Authority	BUS-111109214 APR14	Telephone	778.36		22,163.95
				OCT13 Acct#157424/CPE Lease equipment				
	10/01/2013	157424 OCT2013	IT & E	157424 NOV2013	Telephone	133.00		22,030.95
	11/01/2013	157424	IT & E	157424 DEC2013	Telephone	133.00		21,897.95
	12/01/2013	157424	IT & E	JAN14 Acct# 157424/CPE Lease equipment	Telephone	133.00		21,764.95
	01/01/2014	#157424 JAN14	IT & E	157524 FEB2014	Telephone	133.00		21,631.95
	01/31/2014	157424 FEB2014	IT & E	157424 MAR2014	Telephone	133.00		21,498.95
	03/01/2014	157424 MAR2014	IT & E	Acct#157424/APR2014	Telephone	133.00		21,365.95
	04/01/2014	Acct#157424/APR2014	IT & E	Inv# 845400/MAY2014	Telephone	133.00		21,232.95
	05/01/2014	Inv# 845400/MAY2014	IT & E		Telephone	133.00		21,099.95
				Subtotal: Telephone		6,121.76	0.00	
				Total Telephone Expense		8,993.80	0.00	
Power	11/18/2013	23755	Guam Power Authority	OCT13 Acct# 00170516	Power	2,414.50		18,685.45
	11/18/2013	23755	Guam Power Authority	OCT13 Acct# 00170516	Power	670.70		18,014.75
				AJE due to understated exp/OCT13 Acct# 00170516/ck#23755	Power		357.00	18,371.75
	12/02/2013	23714	Guam Power Authority	SEP13 Acct# 00170516 (Prior Year)	Power	0.00		18,371.75
	12/02/2013	23714	Guam Power Authority	SEP13 Acct# 00170516 (Prior Year)	Power	0.00		18,371.75
	12/15/2013	23782	Guam Power Authority	NOV13 Acct# 00170516	Power	2,112.15		16,259.60

Sanctuary, Incorporated
General Ledger
As of June 30, 2014

Date	Num	Name	Memo	Account	Debit	Credit	Balance
12/15/2013	23782	Guam Power Authority	AJE due to understated exp/NOV13				
01/15/2014	23836	Guam Power Authority	Acct# 00170516	Power	305.50		15,954.10
			DEC13 Acct#00170516	Power	2,151.64		13,802.46
			AJE due to understated exp/DEC13				
01/15/2014	23836	Guam Power Authority	Acct#00170516	Power	1,082.02		12,720.44
01/15/2014	#00244995	Guam Power Authority	JAN14 Acct#00244995	Power	53.45		12,666.99
02/17/2014	23879	Guam Power Authority	Acct# 00170516/JAN14	Power	1,898.36		10,768.63
			AJE due to understated exp/JAN14				
02/17/2014	23879	Guam Power Authority	Acct#00170516	Power	2,503.18		8,265.45
03/14/2014	23904	Guam Power Authority	Acct#00170516/FEB2014	Power	4,807.92		3,457.53
04/14/2014	Acct# 00170516 MA	Guam Power Authority	Acct# 00170516 MAR14	Power	3,629.19		(171.68)
04/14/2014	23922	Guam Power Authority	ADMIN office space	Power	1,869.94		(2,041.62)
05/16/2014	00170516 APR2014	Guam Power Authority	00170516 APR2014	Power	2,714.10		(4,755.72)
05/16/2014	00170516 APR2014	Guam Power Authority	tlp/php office space	Power	2,743.98		(7,499.70)
05/16/2014	00170516 APR2014	Guam Power Authority	admin	Utilities	825.34		(8,325.04)
			Subtotal: Power		29,781.97	387.00	
Water	10/23/2013	23681	Guam Water Works Authority	Acct. W0206621 OCT13	Water	369.60	(8,694.62)
			Acct. W0206621 OCT13/adj cost				
			allocation	Water		82.27	(8,512.35)
10/23/2013	23681	Guam Water Works Authority	Acct# W0603044/ NOV13	Water	16.32		(8,528.67)
11/19/2013	23881	Guam Water Works Authority	Acct# W0206621 NOV13	Water	518.71		(9,047.38)
11/19/2013	23779	Guam Water Works Authority	Acct# W0603044/DEC13	Water	16.39		(9,163.77)
12/16/2013	23881	Guam Water Works Authority	Acct# W0206621 DEC13	Water	315.75		(9,479.52)
12/16/2013	23779	Guam Water Works Authority	Acct# W0502044/JAN14	Water	16.32		(9,495.84)
01/14/2014	23881	Guam Water Works Authority	Acct#W0206621/JAN2014	Water	274.29		(9,770.13)
01/14/2014	23779	Guam Water Works Authority	Acct#W0206621/Jan2014	Water		274.29	(9,495.84)
01/14/2014	23779	Guam Water Works Authority	Acct#W0206621/Jan2014	Water	649.74		(10,145.58)
02/13/2014	23881	Guam Water Works Authority	ACCT#W0603044/FEB14	Water	16.32		(10,161.90)
02/13/2014	23882	Guam Water Works Authority	Acct#W0206621/FEB14	Water	160.81		(10,322.71)
			Acct. W0206621 Feb13/adj cost				
			allocation	Water	220.13		(10,542.84)
10/23/2013	23681	Guam Water Works Authority	Acct#W0206621/MAR2014	Water	1,455.80		(11,998.64)
03/17/2014	23899	Guam Water Works Authority	Acct#W0206621/APR2014	Water	503.30		(12,501.94)
04/15/2014	23899	Guam Water Works Authority	Acct#W0206621/APR2014	Water	259.32		(12,761.26)
			Subtotal: Water		4,792.80	356.56	
			Total Utilities		43,568.57	713.56	
TRASH COLLECTION FEES							
11/15/2013	23768	Guahan Waste Control, Inc.	OCT13	Trash Collection Fees	142.25		(12,903.51)
11/15/2013	0495543-IN	Guahan Waste Control, Inc.	adjustment per billing in NOV13	Trash Collection Fees		0.01	(12,903.50)
12/01/2013	DEC2013	Guahan Waste Control, Inc.	Inv# 0495543 DEC2013	Trash Collection Fees	142.25		(13,045.75)
12/15/2013	0497593-IN	Guahan Waste Control, Inc.	Inv# 0497593 NOV13	Trash Collection Fees	142.25		(13,188.00)
01/15/2014	0500000-IN	Guahan Waste Control, Inc.	INV# 0500000-IN JAN2014	Trash Collection Fees	142.25		(13,330.25)
02/15/2014	0502101-IN	Guahan Waste Control, Inc.	INV# 0500000-IN FEB2014	Trash Collection Fees	142.25		(13,472.50)
			Total Trash Collection Fees		711.25	0.01	
			TOTAL CUMULATIVE EXPENSES, 6/30/14		364,901.17	43,345.17	

Attachment 5

Sanctuary, Incorporated of Guam Victims of Crime Act

Reporting Agency

Office of the Attorney General

Reports

1. List of expenditures for services and equipment \$5,000 or greater
2. Quarterly financial expenditures and obligation
3. Program Progress Report



SANCTUARY, INCORPORATED

"Helping Youth and Families Help Themselves" since 1971

Address: 406 Mai Mai Rd., Chalan Pago, Guam 96910

* Tel: 475-7101 * Fax: 477-3117 * Crisis Hotline: 475-7100

Website: www.sanctuaryguam.org * E-mail: inquiries@sanctuaryguam.org



July 7, 2014

To: Franklin P. Artero
Office of the Attorney General

From: OJ Taitano
Acting Executive Director
Sanctuary, Incorporated of Guam

Re: Program Report

Attached is the quarterly program status report for April 1, 2014 to June 30, 2014.

Should you have any questions, please feel free to contact myself at 475-7101 ext. 119 or Mike Franquez at 475-7101 ext. 116.

Sincerely,

OJ Taitano, Acting Executive Director
Sanctuary Incorporated of Guam



June 20, 2014

MEMORANDUM

To: All Staff
From: Executive Director
RE: Acting Executive Director

Hafa Adai:

Please be advised that effective Monday, June 23, 2014, I will be on leave til July 25, 2014. In my absence, I am appointing OJ Taitano Acting Executive Director. Mr. Taitano will be assisted by Mr. Mike Franquez.

Please give your usual support and cooperation extended to OJ and Mike during this time.

Si Yu'os Ma'ase,


Mildred Q. Lujan

SANCTUARY, INCORPORATED OF GUAM

VICTIM OF CRIME ACT GRANT

Quarterly Progress Program Report
For 2nd Quarter Ending 6/30/14

- A) **PROJECT GRANT NO.: 2012-VA-GX-0029**
- B) **CONTRACT NO.: C131100018**
- C) **FEDERAL FY OF FUNDING: 2014**
- D) **PROJECT TITLE: Sanctuary, Incorporated Victim Assistance Program**
- E) **REPORTING PERIOD: April 2014 – June 2014**
- F) **SUBGRANTEE NAME AND ADDRESS: Sanctuary, Incorporated**
#406 Maimai Road
Chalan Pago, Guam 96910
- G) **REPORT CONTACT: Mildred Lujan, Executive Director**
- H) **ACCOUNT NO.: 5101H121120SE113-280**

I. EXECUTIVE SUMMARY

For this fiscal year, Sanctuary was awarded the sum of \$30,240.00 under Victims of Crime Act (VOCA) grant as indicated above. The funding is made available through the Office of the Attorney General, Government of Guam which is supported through funding from the Victims of Crime Act Grant, Office for Victims of Crime, Office of Justice programs, and is administered by U.S. Department of Justice. The primary purpose of funding is to provide supportive services in psychological counseling to youth between ages of 12 and 21 who seek services through Sanctuary as a result of being affected by domestic violence, child abuse (physical, mental, emotional, and verbal), sexual assault, or other crimes.

In meeting the contract requirements, Sanctuary Incorporated of Guam (Sanctuary) has an open contract with Doris Tolentino, Masters in Social Work (MSW) a licensed Individual Marriage and Family Therapist (IMFT) for clinical consultation and clinical services. As of June 2014 Sanctuary entered into a memorandum of agreement with Dan Duenas, Bachelor of Arts in Sociology, MSW, IMFT, Certified Substance Abuse Counselor (CSAC) and International Alcohol and Drug Abuse Counselor (ICDAC) for clinical consultation. The counseling services are provided individually. The identified counselor will then receive feedback and provide suggestions after each session regarding their experiences of abuse and/or domestic violence.

PROGRAM ACTIVITIES

Sanctuary has taken initiative in net-working with other agencies in promoting awareness of prevention in child abuse or sexual abuse as well as in family violence. Sanctuary participates in monthly meetings sponsored by the Family Violence Coalitions (non-profit organizations) and contributes to the development of the program for the benefit of the community.

II. CONCERNS/PROBLEMS AND PROPOSED SOLUTIONS

An analysis of data for this quarter indicated that the majority of youth who came into emergency shelter from Child Protective Services (CPS) Department of Public Health and Social Services (DPHSS). The second highest number of referrals came from Parents/Legal Guardians and Department of Youth Affairs (DYA). Majority of the referrals and placements into Emergency Shelter by these agencies were related to victims of sexual and physical abuse.

The island community looks to Sanctuary for help and assistance in their time of crisis. A major concern that the program continues to experience is the increase of victims of sexual and physical abuse. Extra sensitivity is required for these youth when they are in shelter. A proposed solution is to ensure that the clients in shelter are receiving the appropriate behavioral health services to meet their needs. Unfortunately, the clinical director position became vacant on April 11, 2014. All cases receiving clinical services from Sanctuary were staffed with the clinical director before April 11, 2014 regarding services. Clients were linked to the appropriate agency based on the recommendations provided by the clinical director.

III. PLANS FOR THE NEXT QUARTER

Sanctuary will continue its efforts to secure necessary funding to provide services to young people who are victims of family violence, child/sexual abuse. Counseling and needed support services are essential and mandatory services to our clientele. There are limited services available on the island for children between the ages of 12 and 21 to deal with their issues related to domestic violence, child abuse, and sexual assault. Staff will continue to participate in various training activities such as Crisis Prevention and Intervention, ASIST (Applied Suicide Intervention Skills Training), First Aid and CPR; and Case Management as it relates to residents in shelter, aftercare and outreach.

**VICTIMS OF CRIME ACT
VICTIM STATISTICS WORKSHEET**

FOR THE PERIOD OF:	April 1, 2014 to June 30, 2014
Organization:	Sanctuary Incorporated of Guam
TYPE OF VICTIMIZATION	TOTAL
<i>1. Child Victims of Physical Abuse (0-17)</i>	
<i>2. Child Victims of Sexual Abuse (0-17)</i>	
<i>3. Victims of DUI/DWI</i>	
<i>4. Victims of Family Violence</i>	1
<i>5. Adult Victims of Sexual Abuse</i>	
<i>6. Elder Abuse</i>	
<i>7. Adults Molested as Children</i>	
<i>8. Survivors of Homicide Victims</i>	
<i>9. Assault</i>	
<i>10. Robbery</i>	
<i>11. Other (TOTAL A-K)</i>	3
<i>A. Arson</i>	
<i>B. Burglary</i>	
<i>C. Child Neglect (Endangerment)</i>	3
<i>D. Fraud</i>	0
1. Forgery	
2. Fraud	
3. Identity Theft	
<i>E. Harassment</i>	0
1. Criminal Mischief	
2. Criminal Trespass	
3. Disorderly Conduct	
4. Harassment	
5. Terrorizing	
<i>F. Kidnapping</i>	
<i>G. Stalking (DV and NON-DV)</i>	
<i>H. Theft</i>	0
1. Theft by Deception	
2. Theft of a Motor Vehicle	
3. Theft of Intellectual Property	
4. Theft of Property	
5. Theft of Services	
<i>I. Vehicular Crimes (Non DUI/DWI)</i>	0
1. Leaving the scene of an accident	
2. Leaving the scene of an accident w/ Injuries	
3. Reckless Driving w/ Injuries	
<i>J. Other: Specify</i>	Attempted Agg Murder
<i>K. Other: Specify</i>	
GRAND TOTAL	4

Victims with Disabilities:	
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**VICTIMS OF CRIME ACT
VICTIM STATISTICS WORKSHEET**

FOR THE PERIOD OF:		April 1, 2014 to June 30, 2014	
Organization:		Sanctuary Incorporated of Guam	
AGE		TOTAL	
0-12			
13-17		4	
18-24			
25-59			
60+			
Unknown			
NATIONAL ORIGIN	TOTAL	NATIONAL ORIGIN	TOTAL
1. African American:	1	6. Filipino:	1
2. Asian :		7. Hispanic:	
3. Caucasian/White:		8. Other Pacific Islander:	
4. Chamorro:	2	9. Other:	
5. Chuukese:		10. Unknown:	
GENDER		TOTAL	
Male		2	
Female		2	
Unknown			
Institutions Victimized		TOTAL	
Business Owned Building/Office/Property			
Religious Organization Building/Office/Property			
Federal Government Building/Office/Property			
Government of Guam Building/Office/Property			
Public or Private School Building/Office/Property			
TYPES OF SERVICES PROVIDED		TOTAL	
Crisis Counseling		174	
Follow-up Contact		22	
Therapy			
Group Treatment/Support			
Shelter/Safe House			
Information & Referral (In- Person)			
Criminal Justice Support/Advocacy			
Assistance in Filing Compensation Claims			
Emergency Financial Assistance			
Emergency Legal Advocacy			
Personal Advocacy			
Telephone Information & Referral		108	
Other: (specify)			
Other: (specify)			



SANCTUARY, INCORPORATED

"Helping Youth and Families Help Themselves" since 1971

Address: 406 Maimai Rd., Chalan Pago, Guam 96910 * Tel: 475-7101 * Fax: 477-3117 * Crisis Hotline: 475-7100
Website: www.sanctuaryguam.org * E-mail: inquiries@sanctuaryguam.org



TRANSMITTAL SHEET

TO:

FROM:

Leonardo M. Rapadas

Sanctuary, Inc.

COMPANY:

DATE:

Office of the Attorney General

7/16/14

Description

VOCA 3rd QTR FY 2014: April 1, 2014-June 30, 2014

*Please sign and return copy to Sanctuary, Incorporated.

Received By:

Name:

Lishawna Munchata

Title:

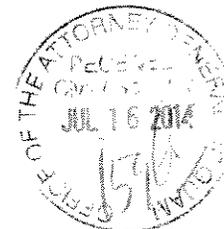
Cost. Serv. Rep.

Signature:

[Handwritten Signature]

Date:

July 16, 14





Sanctuary, Incorporated of Guam

A Non-profit Organization Established in 1971

406 MaiMai Road Chalan Pago, Guam 96910 • Administrative Office (671)475-7101

Crisis Hotline (671)475-7100 • Fax (671)477-3117 • Email: sanctuar@ite.net

www.sanctuaryguam.org



July 15, 2014

Mr. Leonardo M. Rapadas
Attorney General
Office of the Attorney General
287 West O'Brien Drive
Hagatna, Guam 96932

Dear Mr. Rapadas:

The information listed below is for the VOCA Program 3rd quarter of Fiscal Year 2014 from April 1, 2014 – June 30, 2014.

We have listed all expenditures for services and equipment that were \$5,000 or greater.

Services	-0-
Equipment	-0-
Inventory Property	-0-

Please let us know if you have any questions.

Sincerely,

OJ Taitano
Acting Executive Director

FILE



Non Profit Organization Receiving Appropriations from Government of Guam
Pursuant to P.L. 31-77 (Sanctuary, Incorporated)
FY 2014 (April 1, 2014 - June 30, 2014)
3rd Quarter Expenditure Report
Office of the Attorney General
VOCA

Fund	Contract Amount	Object Classification	Expenditure
Federal	\$ 30,240		
		Salary	\$ 8,150
		Benefits	1,166
		Travel	-
		Contractual	-
		Supplies & Materials	-
		Equipment	-
		Utilities	-
		Miscellaneous	-
		Grand Total	<u>\$ 9,315</u>

I CERTIFY THAT THIS IS A TRUE AND CORRECT STATEMENT OF THE EXPENDITURES FOR FISCAL YEAR 2014 FOR THE PROJECT ABOVE.

SIGNATURE OF AUTHORIZED OFFICIAL:



 OJ TAITANO
 ACTING, EXECUTIVE DIRECTOR

DATE: 7/16/14