



The information contained herein is used by AVSA to compile an annual report on the StandDown events that occur throughout the state of Arizona -providing outreach and supportive services to homeless veterans. If you have questions or need assistance with this report, contact Shane Groen at 480-888-6515, or by email at sgroen@azceh.org.

Event contact person: Kim L. Rodriguez
 Organization: Honoring/Hiring/Helping Our Heroes of Pinal (HOHP)
 Mail Address: 318 N. Florence Street, Suite A
 City: Casa Grande State: AZ Zip: 85122
 Telephone: (520) 866-3646 Email: hohp4heroes@gmail.com

Location of Stand Down (City/State) Florence, Arizona Date 3/17/18

NUMBER of VETERANS SERVED: Total 194

Male total 169
 Homeless 10
 Homeless with family 6
 Spouses attending 4
 Dependent Children 4
 Age: Under 25 _____
 26-35 _____
 36-50 _____
 51-65 _____
 65+ _____

Female total 25
 Homeless 1
 Homeless with family 1
 Spouses attending 1
 Dependent Children 1
 Age: Under 25 _____
 26-35 _____
 36-50 _____
 51-65 _____
 65+ _____

STATUS of VETERANS SERVED: Total _____

Male:
 With Disability 34
 Acute Illness _____
 Without Shelter 5
 Unemployed _____
 Without Income _____

Female:
 With Disability 6
 Acute Illness _____
 Without Shelter 1
 Unemployed _____
 Without Income _____

EVENT ADMINISTRATION:

Classification: (Check One) – For descriptions, go to www.nchv.org/standdown.cfm

- ☐ A. Three- or Four-day Stand Down
☐ B. Two-day Homeless Veterans Resource Fair
☒ C. One-day Homeless Veterans Resource Fair

Please share a story related to a veteran that attended the event and had a positive outcome

One of the homeless Veterans attending the event was identified at intake by a volunteer. He was questioned about his Current situation – he was living with his girlfriend in their truck. The volunteer took the Veteran to go get a hair cut and asked if he wanted a shower - he did not want to at that time. The housing organization – NCHP – was alerted and they were able to get a room to conduct a private intake with the Veteran. The Veteran wanted to check on a friends house to see if they could stay with them. He was given information to go to the NCHP office on Monday and then go to the HOHP office as well on Monday. NCHP completed the required documents on the following Monday – HOHP provided emergency shelter for 3 days.

(Continued on reverse side)

SERVICES PROVIDED:

Health Services	
Agent Orange Info/Counseling	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Hepatitis C Screening/Testing	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
HIV/Aids Info/Counseling	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Mental Health Services	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Substance Abuse Services	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Eye glasses (Vision Screening – Lions Club)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Dental exam and/or oral hygiene instruction	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Dental care (cleanings, fillings, extractions, etc.)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Hygiene (haircuts, showers) provided	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Benefits Assistance	
Social Security	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
MVD/ID services	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
DES	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Legal Services	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Courts	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Veterans Benefits Counseling	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Housing/Shelter Referral	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Prevention Assistance	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Employment and Job Training Assistance	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Education Services	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Other Services Provided	
Transportation	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Veterinary Services	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Meals	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Shelter offered during the event	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Spiritual Services	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Activities to empower the veteran (open mic, meetings, graduation)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

Event Budget: (Excluding In-kind donations)

Less than \$5,000 X
 \$5,001 to \$10,000
 \$10,001 to \$15,000
 \$15,001 to \$20,000
 \$20,001 to \$30,000
 Over \$30,000

Total budget **In-Kind Donation Value:**

Less than \$5,000 X
 \$5,001 to \$10,000
 \$10,001 to \$15,000
 \$15,001 to \$20,000
 \$20,001 to \$30,000
 Over \$30,000

Event Personnel

(Insert number)

Organization Staff 10
 Medical Staff 4
 DVOP Representative 1
 Military/Veterans 30

Business partners 51
 VA Representatives 6
 Other Government 2
 Volunteers 50

Total Event Staff 

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www.azceh.org

his budget is intended allow you to make initial projections regarding your standdown event, but is referred to as a "Live" Budget as you can also use it as your event progresses to stay on top of your event planning

Target Deficit => **\$ 790.36** HOHP Paid the rest of the Stand Down Veteran Bags

Donation Source	Cash/Chk
Golden Valley RV Ladies Aux	\$500.00
Daughters of the American Revol	\$50.00
AZ Stand Down Coalition	\$2,000.00

[illegible]