



# DISTRICT SIMPLIFIED GRANT REPORT

To be completed by Rotarians. Return this form to Sharron Miles, 108 Valley View Glen Rose, TX 76043 or smilesrotary5790@gmail.com

Rotary Club: Mineral Wells

Project Title: Mission of Mercy Mineral Wells

Progress Report  Final Report

## Project Description

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

We provided free dental care to 148 persons who have been identified as living below the poverty level, and because of this have no access to Dental Care. We set up a one day clinic with 14 dental chairs staffed with dentists and hygienists who were recruited with help of the Texas Dental Association's Smile Foundation. The Smile Foundation provided the equipment needed for this, and helped our local Rotary plan the project. Rotarians with medical and dental backgrounds served as clinic personnel. Other Rotarians helped serving food to volunteers and patients in the waiting areas, shuttling patients between clinic areas, as well as aiding in set up and breakdown of clinic. Also Rotarians served on the planning committee. Project funds were used to transport the clinic equipment, dental supplies used, any necessary repair and or expenses incurred in setting up dental chairs and units and sterilizers, facility rental, meals and hospitality. The project was staged with the Triage area being at the First Baptist Church, and the clinic at the Mineral Wells Senior Center. We provided \$130,000 of dental care to our patients.

2. How many Rotarians participated in the project? 13

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

We had 10 Local Rotarians participate. They helped as Fundraising Chair, Hospitality chair Dental Chair. They were involved in setting up the clinic, feeding the volunteers and patients. One served with his family in the sterilization area. One is a nurse and helped getting vital signs and taking medical histories. We had one local dentist, and 3 Rotarian dentists from other clubs in Texas treating patients.

4. How many non-Rotarians benefited from this project? 148

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

With this many patients receiving care for their dental pain it will temporarily alleviate the load of dental emergency patients using the local Hospital emergency room. The dental education provided in the Triage area may prevent future dental issues. We had many college age volunteers who are considering a career in dentistry, thus providing them with an education in serving their future communities.

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

The Texas Smiles Foundation provided the equipment and supplies needed, and personnel to help implement the project. They also will maintain and store the patient records. They helped recruit dental volunteers

## Financial Report - Be sure that Income equals Expenditures!

7. Income	Amount
1. District Simplified Grant funds approved by the District	\$4000
2. Club contribution	\$4000
3. Other funding (specify)	
<b>Total Project Income</b>	<b>8000.</b>

8. Expenditures - please be specific and add lines as needed - receipts must be attached

1. Security Services \$700.00 Postage & Couriers \$146.56	
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Printing \$482.00 Supplies-Office \$210.97 Awards and Recognition \$1,463.43 Equipment Purchases (Small) \$127.90 Equipment Rentals \$250.00 Equipment Transportation \$1,000.00 Insurance - Liability \$131.14 Meals and Hospitality \$520.00 Supplies-Dental \$1,857.55 Supplies-On Site \$48.60 Technical Support \$250.00 Telephone \$145.28 Travel \$679.74	
2.	
3.	
4.	
5.	
6.	
<b>Total Project Expenditures</b>	<b>\$8000</b>

9. By signing this report, I confirm that to the best of my knowledge these District Simplified Grant funds were spent only for eligible items in accordance with Trustee-approved guidelines, and that all of the information contained herein is true and accurate. Receipts for all grant-funded expenditures have been provided to the district. I also understand that all photographs submitted in connection with this report will become the property of RI and will not be returned. I warrant that I own all rights in the photographs, including copyright, and hereby grant RI and TRF a royalty free irrevocable license to use the photographs now or at any time in the future, throughout the world in any manner it so chooses and in any medium now known or later developed. This includes the right to modify the photograph(s) as necessary in RI's sole discretion. This also includes, without limitation, use on or in the web sites, magazines, brochures, pamphlets, exhibitions and any other promotional materials of RI and TRF.

Certifying Signature Saskia C Vaughan Date: 06/15/2014

Print name, Rotary title, and club Saskia C Vaughan DDS President Elect Mineral Wells Rotary