



S.L. Gimbel Final Evaluation Report Questions

Questions 1-15 are required and must be completed

1. Organization name: *Casa Teresa*
2. Grant # *20170374*
3. Grant Period: *August 1, 2017 to July 30, 2018*
4. Location of Services (City and State): *Orange, California*
5. Name and Title of person completing evaluation: *Lisa Wood, CEO*
6. Phone Number: *714-538-4860*
7. Email address: *lwood@casateresa.org*
8. Total number of clients served through this grant funding: *77 total residents served (52, women, 10 children, 15 babies)*
9. Describe the project's key outcomes and results based on the goals and objectives:

GOAL: The overall goal of EMS is to address the immediate needs of homeless pregnant women in crisis, taking them off the street, getting them into programs for substance abuse, and to assist them to seek medical care as they prepare for the arrival of their baby.

Objective: Our objective for EMS in 2017-2018 is to assist 100 residents with shelter, food, access to health care and improving overall health and wellbeing by enrolling them in classes and counseling.

Outcomes: In FY 2017-2018 - *77 women, children and babies were served in our emergency shelter and provided with food. We provided all 52 women with access to medical care, prenatal care and mental health support. We enrolled all 52 women into classes (such as substance abuse, human trafficking and domestic violence) and individual counseling through our partnership with Mariposa Women's Center.*

Evaluation: To determine the impact of our activities, Casa Teresa tracks several indicators through case management and the use of standardized measurement tools. *At the service level, we provided 77 residents with 6,189 bed nights plus meals, and 2,448 case management meetings, evaluations, and 420 workshops/classes provided. To measure self-sufficiency and overall health and wellbeing for our residents, we utilize a Self-Sufficiency Matrix which rates*

clients on a 1-5 scale in domains such as housing, health, substance abuse, support network, vocational training, legal, financial, and children's education with a goal of improving each woman's self-sufficiency by 75%, which was to 82%. The health and well-being of each resident is tracked using Activities for Daily Living (ADLs) to measure how each resident is doing in life skills learning and functioning. Lastly, we also monitor the resident's attendance and compliance with medical visits, mental health appointments, or substance abuse treatment.

10. Please describe any challenges/obstacles the organization encountered (if any) in attaining stated goals & objectives.

During the FY 2017-18 out of a need to regain financial stability, we moved the Emergency Maternity Shelter onto our main campus. In order to impact the residents a little as possible, we had a period of one month in which we were serving very few residents. However, within another month we filled the available beds.

11. How did the organization overcome and/or address the challenges and obstacles?

In regard to our fiscal health, in addition to the move of the program, we reduced staffing and experienced a cost savings from not running a completely separate campus. This allowed us to end the year in the positive (after the organization experiencing 3 years of deficit).

12. Describe any unintended positive outcomes as a result of the efforts supported by this grant.

With this grant from S.L. Gimbel Foundation Fund in support of the Emergency Maternity Shelter program and the move we had to make in order to continue our mission - what we found is that with our staff being in the same physical space, we were not having as many women exit early from the program – because staff was able to make residents feel physically and emotionally safe and establish trust in a shorter amount of time.

13. Briefly describe the impact this grant has had on the organization and community served.

Casa Teresa's Emergency Maternity Shelter provides for the most vulnerable population – pregnant women, with addiction, chronic homelessness, mental health issues, victims of abuse and trauma. These women would not be served otherwise in our program which requires longer sobriety and increased mental health stability.

14. Please provide a narrative on how the funds were used to fulfill grant objectives. Support documents (receipts, expense reports or marketing materials) can be emailed to grant-info@thecommunityfoundation.net or faxed to 951-684-1911 or mailed to The Community Foundation, 3700 Sixth St. Suite 200, Riverside, CA 92501

Per our budget narrative that was submitted with our grant:

- \$10,000 for personnel salaries: \$3,500 is 35% of a case manager and \$6,500 is 65% of a house mom's salary for the EMS program.
- \$5,000 for supplies and assistance to residents: attached (and mailed) are receipts for supplies for EMS and for counseling/classes through our relationship with Mariposa Women's Center for the residents in EMS.

- \$10,000 for mortgage interest: attached (and mailed) is documentation of the mortgage interest for the EMS property.

15. Please relate a success story.

Tracy R. entered our Emergency Maternity Shelter in March of 2018. She had been abusing drugs, homeless and her boyfriend was physically abusing her. She did well in the EMS program and moved into the Parenting program until she gave birth. During that time she obtained her High School Equivalent through our partnership with American Career College. She was accepted into our Transition 1 program where she cleared up her legal issues and re-established a relationship with her mother who had guardianship over her other children. She successfully moved into the Transition 2 program and has been working on her Dental Assistant Certification through American Career College and having her children stay with her during the weekends. Today, she is preparing to graduate from Transition 2 and move into the next phase of her journey.

Questions 16-24 are optional questions and relate to demographic information on clients served. This helps us provide a broader picture of your organization and populations being served.

(Q16-17 optional space to relate additional success stories)

18. Which category best describes the organization. Please choose only one. *Human Dignity*

19. What is the organization's primary program area of interest? *Ending generational cycles of addiction, abuse and homelessness.*

20. Approximate percentage of clients served through grant in each ethnic group category. Total must equal 100%

*35% Hispanic or Latino
3% American Indian/Alaska Native
1% Asian
10% Black or African American
2% Native Hawaiian & Other Pacific Islander
45% White
4% Two or More Races*

21. Approximate percentage of clients served from grant funds in each age category.

*67% adults
12% children
21% babies*

22. Approximate percentage of clients served with disabilities from grant funds. *90% of our residents have disabilities.*

23. Approximate percentage of clients served in each economic group. *100% of our residents are in poverty.*

24. Approximate percentage of clients served from grant funds in each population category.

0.00 *

0.00 *

Household
Supplies

241.19 +

224.48 +

251.58 +

288.31 +

212.04 +

211.28 +

217.56 +

271.95 +

93.88 +

2,012.27 *

Assistance
to Residents

1,500.00 +

1,500.00 +

5,012.27 *

Direct Program Services

Costco

Household supplies

8/10/2017

\$241.19

aWF-Gen'l Checking(Costco - EMS



Date: 8/10/17

FUNDS REQUEST

1. Purchased from: Costco & Stater Bros 8/11/17
Reason for Funds: Groceries & Household supplies

2. FUNDS [checked] REIMBURSEMENT

Table with 2 columns: Program(s) and \$ Amount. Rows include Parenting, T-1, T-2, EMS (checked), Nutrition, Career Center, Fund Dev, Event, Admin, The Collection, and TOTAL.

3 Request payment as: Check [checked] Cash

Check payable to: Costco & Stater Bros.
Pre-authorization required over \$100

4. Requested by: Nicole EMS

5. Approved: [Signature]
POSTED 8/10/17

6. Attach all receipts - thank you!



Tustin #122
2655 El Camino Real
Tustin, CA 92782
(714) 838-7895

T8 Member 111796465832

	512599 KS TOWEL ***	15.69 A
	585578 KS TISSUE***	15.99 A
	1111161 DIXIE PLATE	16.49 A
	0000168815 /1111161	3.50-
	921279 FRZ GAL ZIPR	13.74 A
	0000168584 / 921279	2.75-
	921389 FRZ QRT ZIPR	11.99 A
	0000168588 / 921389	2.50-
	662877 BOWL CLEANER	7.99 A
	662877 BOWL CLEANER	7.99 A
	596639 SWIFFER WET	14.99 A
	0000168811 / 596639	3.00-
	596639 SWIFFER WET	14.99 A
	0000168811 / 596639	3.00-
	1038786 CLOROX WIPES	13.99 A
	0000168817 /1038786	2.80-
E	17767 KS COFFEE	9.99
E	1074184 KS OLIVE OIL	31.99
	742895 LYSOLBRZE4PK	14.99 A
	1000001 COET COPUP	7.99 A
	811482 SPRAYWAY	6.99 A
	811482 SPRAYWAY	6.99 A
	1134918 PLEDGE LEMON	9.99 A
E	309881 RUFFLES	5.49
E	382861 KS CHKN BRST	16.89
	SUBTOTAL	227.21
	TAX	13.98
****	TOTAL	241.19
	Check/Member Writn	241.19
	CHANGE	0.00

Costco

Household supplies

8/16/2017

8/25

\$224.48

aWF-Gen'l Checking(Costco - EMS



Date: 8/18/17

FUNDS REQUEST

1. Purchased from: Costco & Stater Bros
 Reason for Funds: Household supplies & Groceries 8/18/17

2. FUNDS REIMBURSEMENT

6. Program(s) (✓): \$ Amount

3 Request payment as: Check Cash

Parenting _____

T-1 _____ T-2 _____

EMS _____

Nutrition _____

Career Center _____

Fund Dev _____

Event _____

Admin _____

The Collection _____

TOTAL 224.48

Check payable to: Costco & Stater Bros

Pre-authorization required over \$100

4. Requested by: Nicole - EMS

5. Approved: _____

POSTED
8/25/17

6. **Attach all receipts - thank you!**



Tustin #122
2655 El Camino Real
Tustin, CA 92782
(714) 838-7895

N1 Member 111796465832

	585578 KS TISSUE****	15.99 A
	51199 KS TISSUE****	15.69 A
	596639 SWIFFER WET	14.99 A
	0000168811 / 596639	3.00-
	384324 TRASHBAG****	16.39 A
	1089787 KS TRASH****	13.99 A
	87507 KS 10 GALLON	9.59 A
	617686 SOFTSOAP	8.99 A
	0000172546 / 617686	2.00-
	836207 DIAPERGENIE	19.99 A
	0000170566 / 836207	4.00-
E	382861 KS CHKN BRST	16.89
	1038786 CLOROX WIPES	13.59 A
	0000168817 / 1038786	2.80-
	1038786 CLOROX WIPES	13.59 A
	0000168817 / 1038786	2.80-
	912357 DOVE BW 3PK	14.99 A
	3 @ 7.99	
	1143678 FEBREZE AIR	23.97 A
	2 @ 6.99	
	811482 SPRAYWAY	13.98 A
E	309881 RUFFLES	5.49
E	4900 PICK 2	5.79
	SUBTOTAL	209.31
	TAX	15.17
****	TOTAL	224.48
	Check/Member Writn	224.48
	CHANGE	0.00

Costco

Household supplies

9/15/2017

\$251.50

aWF-Gen'l Checking(Costco - EMS



Date: 9/10/17

FUNDS REQUEST

1. Purchased from: Stater Bros. / Costco (9/17/17)
 Reason for Funds: groceries

2. FUNDS REIMBURSEMENT

3 Request payment as: Check Cash

Check payable to: Stater Bros.

Pre-authorization required over \$100

4. Requested by: Shelby - EMS

5. Approved: _____

6. Program(s) (✓):	\$ Amount
Parenting	_____
T-1	_____ T-2
<input checked="" type="checkbox"/> EMS	_____
Nutrition	_____
Career Center	_____
Fund Dev	_____
Event	_____
Admin	_____
The Collection	_____
TOTAL	_____

6. Attach all receipts - thank you!

POSTED
9/18/17



Tustin #122

2655 El Camino Real

Tustin, CA 92782

(714) 838-7895

D1 Member 111796465832

	1038786 CLOROX WIPES	13.59 A
	1038786 CLOROX WIPES	13.59 A
	672026 LUNCH PLATE	14.39 A
	52600 DOVE SHMP 40	6.99 A
	52600 DOVE SHMP 40	6.99 A
	52601 DOVE COND 40	6.99 A
E	1074184 KS OLIVE OIL	31.99
E	3471 GARLIC TOAST	9.39
E	26968 KS LASAGNA	11.99
E	26968 KS LASAGNA	11.99
	662877 BOWL CLEANER	7.99 A
	596639 SWIFFER WET	14.99 A
	596639 SWIFFER WET	14.99 A
	512599 KS TOWEL ***	15.99 A
	742895 LYSOLBRZE4PK	14.99 A
	1134918 PLEDGE LEMON	9.99 A
E	382861 KS CHKN BRST	16.89
E	382861 KS CHKN BRST	16.89
	SUBTOTAL	240.62
	TAX	10.96
****	TOTAL	251.58
	Check/Member Writn	251.58
	CHANGE	0.00

Costco

Household supplies

10/4/2017

\$288.31

aWF-Gen'l Checking(Costco - EMS



Date: 10/1/17

FUNDS REQUEST

1. Purchased from: Costco & Stater Bros (10/6/17)
Reason for Funds: household supplies & Groceries

2. FUNDS REIMBURSEMENT

3 Request payment as: Check Cash **POSTED**

Check payable to: Costco & Stater Bros
Pre-authorization required over \$100

4. Requested by: Nicole - EMS

5. Approved: _____

6. Program(s) (✓):	\$ Amount
<input type="checkbox"/> Parenting	_____
<input type="checkbox"/> T-1 <input type="checkbox"/> T-2	_____
<input checked="" type="checkbox"/> EMS	_____
<input type="checkbox"/> Nutrition	_____
<input type="checkbox"/> Career Center	_____
<input type="checkbox"/> Fund Dev	_____
Event _____	_____
<input type="checkbox"/> Admin	_____
<input type="checkbox"/> The Collection	_____
TOTAL	<u>288.31</u>

6. **Attach all receipts - thank you!**



Tustin #122
 2655 El Camino Real
 Tustin, CA 92782
 (714) 838-7895

4N Member 111796465832

	512599	KS TOWEL ***	15.99	A
	585578	KS TISSUE***	15.99	A
	596639	SWIFFER WET	14.99	A
	0000171104	/596639	3.00-	
	1189436	CLOROX WIPES	13.49	A
E	71648	YUBAN	9.89	
	631086	SCRUB COMBO	11.49	A
	1134918	PLEDGE LEMON	9.99	A
E	1074184	KS OLIVE OIL	31.99	
	845627	KS LIQ ENVIR	10.99	A
	1143678	FEBREZE AIR	7.99	A
	0000171108	/1143678	2.00-	
	911884	DOVE BW 3PK	14.99	A
	596639	SWIFFER WET	14.99	A
	0000171104	/596639	3.00-	
E	679131	MAPLE SYRUP	10.99	
E	679131	MAPLE SYRUP	10.99	
E	7874	10#S PANCAKE	5.99	
E	382870	KS CKN TNDRS	15.99	
E	382861	KS CHKN BRST	16.89	

E	292652	ADF MOZZ SSG	13.79	
	1151653	DOVEADVCONDI	8.99	A
	1151652	DOVEADVSHAMP	8.99	A
	1151652	DOVEADVSHAMP	8.99	A
	1151653	DOVEADVCONDI	8.99	A
		SUBTOTAL	275.38	
		TAX	12.93	
	****	TOTAL	288.31	
		Check/Member W/ltm	288.31	
		CHANGE	0.00	

A 7.75% TAX 12.93
 TOTAL TAX 12.93
 TOTAL NUMBER ITEMS SOLD = 22
 INSTANT SAVINGS \$ 8.00

10/03/2017 12:51 122 13 171 87
 OP#: 87 Name: JOHNNY M

Thank You!
 Please Come Again
 Whse:122 Trm:13 Trn: 7

Costco

Household supplies

10/19/2017

\$212.04

aWF-Gen'l Checking(Costco - EMS



Date: 10/14/17

FUNDS REQUEST

1. Purchased from: Costco & Staler Bros 10/21/17
 Reason for Funds: Household supplies & Groceries

2. FUNDS REIMBURSEMENT

3 Request payment as: Check Cash

Check payable to: Costco & Staler Bros

Pre-authorization required over \$100

4. Requested by: Nicole EMS

5. Approved: _____

6. Program(s) (✓):	\$ Amount
Parenting	_____
T-1	_____
<input checked="" type="checkbox"/> EMS	_____
Nutrition	_____
Career Center	_____
Fund Dev	_____
Event	_____
Admin	_____
The Collection	_____

POSTED
10/21/17

TOTAL 212.04

6. **Attach all receipts - thank you!**



Tustin #122
 2655 El Camino Real
 Tustin, CA 92782
 (714) 838-7895

OE Member #112 4

E	382861	KS CHKN BRST	16.89
E	653734	LS HOT LINKS	11.89
	1143678	FEBREZE AIR	7.99 A
	0000171108 /1143678		2.00-
	742895	LYSOLBRZE4PK	14.99 A
	0000171010 /742895		3.60-
	512599	KS TOWEL ***	15.99 A
	1189436	CLOROX WIPES	13.49 A
	672026	LUNCH PLATE	14.39 A
	845627	KS LIQ ENVIR	10.99 A
E	17767	KS COFFEE	9.99
E	26968	KS LASAGNA	11.99
E	173591	ORG KETCHUP	7.49
E	1074184	KS OLIVE OIL	32.99
	87507	KS 10 GALLON	9.49 A
	1089787	KS TRASH****	13.99 A
	585578	KS TISSUE***	15.99 A
		SUBTOTAL	202.95
		TAX	9.09
	****	TOTAL	212.04
		Check/Member Writn	212.04
		CHANGE	0.00

A 7.75% TAX 9.09
 TOTAL TAX 9.09

TOTAL NUMBER OF ITEMS SOLD = 15
 INSTANT SAVINGS \$ 5.60

10/21/2011 14:03 122 2 287 96

OP#: 96 Name: MONICA R

Thank You!

Please Come Again

Whse:122 Trm:2 Tpn:287 OP:96

Costco

Household supplies

10/26/2017

\$211.28

aWF-Gen'l Checking(Costco - EMS



Date: 10/22/17

FUNDS REQUEST

1. Purchased from: Costco & Staler bros (10/27/17)
Reason for Funds: household supplies & Groceries

2. FUNDS REIMBURSEMENT

6. Program(s) (✓):	\$ Amount
<input type="checkbox"/> Parenting	_____
<input type="checkbox"/> T-1 <input type="checkbox"/> T-2	_____
<input checked="" type="checkbox"/> EMS	_____
<input type="checkbox"/> Nutrition	_____
<input type="checkbox"/> Career Center	_____
<input type="checkbox"/> Fund Dev	_____
Event _____	_____
<input type="checkbox"/> Admin	_____
<input type="checkbox"/> The Collection	_____
TOTAL	<u>211.28</u>

3 Request payment as: Check Cash

Check payable to: Costco & Staler bros
Pre-authorization required over \$100

4. Requested by: Nide EMS

5. Approved: _____
POSTED
10/30/17

6. **Attach all receipts - thank you!**



Tustin #122
 2655 El Camino Real
 Tustin, CA 92782
 (714) 838-7895

J8 Member 111796465832

	596639 SWIFFER WEI	14.99 A
	596639 SWIFFER WET	14.99 A
	662877 BOWL CLEANER	7.99 A
E	616312 CATTLE DRIVE	10.79
E	992756 KRT FRM 24OZ	7.99
E	0000173952 / 992756	2.20-
E	992756 KRT FRM 24OZ	7.99
E	0000173952 / 992756	2.20-
E	541334 COFFEE-MATE	5.99
	1189436 CLOROX WIPES	13.49 A
	0000174410 /CLOROXWIPES	2.80-A
	585578 KS TISSUE***	15.99 A
	512599 KS TOWEL ***	15.99 A
	2 @ 8.99	
	1151653 DOVEADVCONDI	17.98 A
	1151652 DOVEADVSHAMP	8.99 A
E	70000 KS BACON	12.99
	1143678 FEBREZE AIR	7.99 A
E	382861 KS CHKN BRST	16.89
E	722203 KS MEX CHEES	7.49
	911884 DOVE BW 3PK	14.99 A
	0000173895 / 911884	3.50-A
	1099321 SOFT SCRUB	7.99 A
	SUBTOTAL	200.81
	TAX	10.47
	**** TOTAL	211.28
	Check/Member Writn	211.28
	CHANGE	0.00

A 7.75% TAX 10.47
 TOTAL TAX 10.47

TOTAL NUMBER OF ITEMS SOLD = 19
 INSTANT SAVINGS \$ 10.70

10/23/2017 16:02 122 6 302 81

OP#: 81 Name: GILBERTO M

Thank You!

Please Come Again

hse:122 Trn:6 Trn:302 OP:81

Costco

Household supplies

11/1/2017

\$217.56

aWF-Gen'l Checking(Costco - EMS



Date: 10/29/17

FUNDS REQUEST

1. Purchased from: Costco & Staterbros (11/5/17)
Reason for Funds: Household Supplies & Groceries

2. FUNDS [checked] REIMBURSEMENT

7. Program(s) (✓): \$ Amount

3 Request payment as: Check [checked] Cash

- Parenting
T-1 T-2
[checked] EMS
Nutrition
Admin
Fund Dev
Event
Admin
The Collection
TOTAL

Check payable to: Costco & Staterbros

4. Requested by: Nicole - EMS

5. Approved:

6. Attach all receipts - thank you!



Tustin #122
 2655 El Camino Real
 Tustin, CA 92782
 (714) 838-7895

IT Member 111796465832

742895	LYSOLBRZE4PK	14.99 A
631086	SCRUB COMBO	11.49 A
0000175413 / 631086		3.00-
811482	SPRAYWAY	6.99 A
1189436	CLOROX WIPES	13.49 A
0000174410 /CLOROXWIPES		2.80-A
596639	SWIFFER WET	14.99 A
1089787	KS TRASH****	13.99 A
1134918	PLEDGE LEMON	9.99 A
845627	KS LIQ ENVIR	10.99 A
672026	LUNCH PLATE	14.39 A
512599	KS TOWEL ***	15.99 A
585578	KS TISSUE***	15.99 A
1121472	KTCHN SPONGE	12.99 A
0000173971 /1121472		3.20-A
E 17767	KS COFFEE	9.99
911884	DOVE BW 3PK	14.99 A
0000173895 / 911884		3.50-A
E 382861	KS CHKN BRST	16.89
1151652	DOVEADVSHAMP	8.99 A
1151652	DOVEADVSHAMP	8.99 A
	SUBTOTAL	203.63
	TAX	13.93
****	TOTAL	217.56
	Check/Member Writn	217.56
	CHANGE	0.00

A 7.75% TAX 13.93
 TOTAL TAX 13.93
 TOTAL NUMBER OF ITEMS SOLD = 17
 INSTANT SAVINGS \$ 12.50

~~11/20/2011~~ 13:50 122 10 209 4

OP#: 4 Name: Nicolas C

Thank You!

Please Come Again

Whse:122 Trm:10 Trn:209 OP:4

Costco

12/6/2017

Household supplies

\$271.95

aWF-Gen'l Checking(Costco - EMS



Date: 12/3/17

FUNDS REQUEST

1. Purchased from: Costco & Stater Bros (12/8/17)
Reason for Funds: Household supplies & Groceries

2. FUNDS REIMBURSEMENT

Table with 2 columns: Program(s) and \$ Amount. Rows include Parenting, T-1, T-2, EMS (checked), Nutrition, Admin, Fund Dev, Event, Admin, The Collection.

3 Request payment as: Check Cash

Check payable to: Costco & Stater Bros

4. Requested by: Nicole - EMS

5. Approved: POSTED

TOTAL 271.95

6. Attach all receipts - thank you!



Tustin #122
 2655 El Camino Real
 Tustin, CA 92782
 (714) 838-7895

OE Member 111796465832

	512599 KS TOWEL ***	15.99 A
	585578 KS TISSUE***	15.99 A
E	26968 KS LASAGNA	11.99
	836207 DIAPERGENIE	19.99 A
E	17767 KS COFFEE	8.99
E	17767 KS COFFEE	8.99
E	541334 COFFEE-MATE	5.99
	672026 LUNCH PLATE	14.39 A
	845627 KS LIQ ENVIR	10.99 A
	596639 SWIFFER WET	14.99 A
	662877 BOWL CLEANER	7.99 A
	921279 FRZ GAL ZIPR	13.79 A
	990929 DAWN ADV PT	9.49 A
	990929 DAWN ADV PT	9.49 A
E	70000 KS BACON	10.99
E	382861 KS CHKN BRST	16.99
	1189436 CLOROX WIPES	14.49 A
	1189436 CLOROX WIPES	14.49 A
	1143678 FEBREZE AIR	7.99 A
	1099321 SOFT SCRUB	7.99 A
	742895 LYSOLBRZE4PK	14.99 A
	SUBTOTAL	256.99
	TAX	14.96
****	TOTAL	271.95
	Check/Member Writn	271.95
	CHANGE	0.00

A 7.75% TAX 14.96
 TOTAL TAX 14.96
 TOTAL NUMBER OF ITEMS SOLD = 21

12/09/2017 14:10 122 6 207 59

SEASONS GREETINGS & HAPPY HOLIDAYS

OP#: 59 Name: Karen V.

Thank You!

Please Come Again

Whse:122 Trm:6 Trn:207 OP:59

Costco

Household supplies

9/21/2017

\$93.88 ✓

aWF-Gen'l Checking(Costco - EMS



Date: 9/17/17

FUNDS REQUEST

1. Purchased from: Costco & Stater Bros (9/23/17)
 Reason for Funds: Household & Groceries

2. FUNDS X REIMBURSEMENT _____

6. Program(s) (✓):	\$ Amount
___ Parenting	_____
___ T-1 ___ T-2	_____
<u>X</u> EMS	_____
___ Nutrition	_____
___ Career Center	_____
___ Fund Dev	_____
Event _____	_____
___ Admin	_____
___ The Collection	_____
TOTAL	<u>93.88</u> ✓

3 Request payment as: Check X Cash _____

Check payable to: Costco & Stater Bros

Pre-authorization required over \$100

4. Requested by: Nicole - EMS

5. Approved: _____

6. **Attach all receipts - thank you!**



Tustin #122
2655 El Camino Real
Tustin, CA 92782
(714) 837 7895

N4 Member 1117964658J2

585578 KS TISSUE***	15.99	A
1038786 CLORO WIPES	13.49	A
E 382861 KS CH BRST	16.89	
845627 KS LIQ ENVIR	10.99	A
596639 SWIFFER WET	14.99	A
512599 KS TOWEL ***	15.99	A
SUBTOTAL	88.34	
TAX	5.54	
**** TOTAL	93.88	
Check/Member Writn	93.88	
CHANGE	0.00	

A 7.75% TAX 5.54
TOTAL TAX 5.54

TOTAL NUMBER OF ITEMS SOLD = 6

09/23/2011 14:53 122 7 186 61

OP#: 61 Name: Danielle L.

Thank You!

Please Come Again

Whse:122 Trm:7 Trn:186 OP:61

Mariposa Women and Family Center

Date	Type	Reference	Original Amt.	Balance Due	5/16/2018 Discount	Payment
5/1/2018	Bill		1,500.00	1,500.00		1,500.00
5/1/2018	Bill	Lorena Arciniega	60.00	60.00		60.00
5/1/2018	Bill	Lucy Gunderman	40.00	40.00		40.00
5/1/2018	Bill	Alexanderia Stebbins	30.00	30.00		30.00
5/1/2018	Bill	Georgina Marin	55.00	55.00		55.00
5/1/2018	Bill	Georgina Marin	55.00	55.00		55.00
5/1/2018	Bill	Natalie Hernandez	60.00	60.00		60.00
5/1/2018	Bill	Kimberly MunozFilson	45.00	45.00		45.00
5/1/2018	Bill	Kaelyn Fitzgerald	45.00	45.00		45.00
5/1/2018	Bill	Cassandra Freeman	30.00	30.00		30.00
5/1/2018	Bill	Adriana Sanchez	45.00	45.00		45.00
Check Amount						1,965.00

First Rep Checking (x

1,965.00

SF5001NLHG-1

TO REORDER, CALL YOUR LOCAL SAFEGUARD DISTRIBUTOR AT 800-427-6741

C8MRVZ0010000 Y17SF001292

 Safeguard LITHO USA SFHG1 CN7SHG111H

E3DBBF SLKDK02 02/23/2018 07:48 -103-

Assistance to Resident

Mariposa Women and Family Center
 812 W Town and Country Rd
 Orange CA 92868-4712
 Phone No.: 714-547-6494

Invoice

Date	Invoice #
4/30/2018	Jan-April18

Bill To
Casa Teresa PO Box 429 Orange, CA 92868

Fed ID # 95-3626580

Quantity	Item Code	Description	Price Each	Amount
1	CT12	Casa Teresa Group- 1/ 22/2018	125.00	125.00
1	CT12	Casa Teresa Group- 2/5/2018	125.00	125.00
1	CT12	Casa Teresa Group- 2/12/2018	125.00	125.00
1	CT12	Casa Teresa Group-2/26/2018	125.00	125.00
1	CT12	Casa Teresa Group- 3/5/2018	125.00	125.00
1	CT12	Casa Teresa Group- 3/12/2018	125.00	125.00
1	CT12	Casa Teresa Group-3/19/2018	125.00	125.00
1	CT12	Casa Teresa Group- 3/26/2018	125.00	125.00
1	CT12	Casa Teresa Group-4/02/2018	125.00	125.00
1	CT12	Casa Teresa Group- 4/9/2018	125.00	125.00
1	CT12	Casa Teresa Group-4/16/2018	125.00	125.00
1	CT12	Casa Teresa Group-4/23/2018	125.00	125.00
PAID <i>Shelter only</i> POSTED 5/9/18			Total	
			\$1,500.00	

Mariposa Women and Family Center

Date	Type	Reference	Original Amt.	Balance Due	2/1/2018 Discount	Payment
1/29/2018	Bill		1,500.00	1,500.00		1,500.00
					Check Amount	1,500.00

First Bank Checking (12 - Group Sessions from 10/2 thru 1/8 1,500.00

Assistance to Resident

Mariposa Women and Family Center

812 W. Town and Country RD
 Orange, CA 92868
 TAX ID: 95-3626580

Phone: 714-547-6494
 Fax: 714-547-6464
 Email: JPATTERSON@MARIPOSACENTER.ORG

Invoice

Date: October 1, 2017- January 8, 2018
 Customer: CASA TERESA

Bill To: CASA TERESA

Date	Description	Amount	Balance
10/2/2017	GROUP SESSION	\$ 125.00	\$ 125.00
10/9/2017	GROUP SESSION	\$ 125.00	\$ 125.00
10/16/2017	GROUP SESSION	\$ 125.00	\$ 125.00
10/23/2017	GROUP SESSION	\$ 125.00	\$ 125.00
10/30/2017	GROUP SESSION	\$ 125.00	\$ 125.00
11/6/2017	GROUP SESSION	\$ 125.00	\$ 125.00
11/13/2017	GROUP SESSION	\$ 125.00	\$ 125.00
11/20/2017	GROUP SESSION	\$ 125.00	\$ 125.00
11/27/2017	GROUP SESSION	\$ 125.00	\$ 125.00
12/4/2017	GROUP SESSION	\$ 125.00	\$ 125.00
12/11/2017	GROUP SESSION	\$ 125.00	\$ 125.00
12/18/2017	NO GROUP	-	-
12/25/2017	HOLIDAY	-	-
1/1/2018	HOLIDAY	-	-
1/8/2018	GROUP SESSION	125.00	125.00
1/15/2018	HOLIDAY	-	-

Handwritten checkmarks in the right margin of the table, corresponding to each row.

POSTED
1/22/18

PAID

Total \$ 1,500.00



Shelter Only

AM

0.00 *

4.068.75 +

3.937.50 +

4.068.75 +

12.075.00 *

ACCOUNT STATEMENT



FIRST REPUBLIC BANK
It's a privilege to serve you®

LOAN STATEMENT

For any address/phone changes check this box and indicate changes on reverse side.



6ux4a
00876

OZ 01
CASA TERESA INC
123 W MAPLE AVE
ORANGE CA 92866

RETURN SERVICE REQUESTED



499921021061067611710150844000000000487862

YOUR CHECKING ACCOUNT # XXXXXXXX8599 WILL BE CHARGED THESE AMOUNTS

FIRST REPUBLIC BANK

LOAN STATEMENT

Statement Date: August 18, 2017
Account Number: [REDACTED]

PAYMENT AND BALANCE SUMMARY

Payment Due Date	08/31/17	Principal	\$0.00
Current Payment Due:	\$4,878.62	Interest	\$4,878.62
Past Due Amount	\$0.00	Fees	\$0.00
Total Payment Due	\$4,878.62	Late Charge	\$0.00

*If "Total Payment Due" is not received by the end of your grace period, your loan may be assessed a late charge. See your loan agreement for details.

UNLESS DESIGNATED IN THE DETACHABLE COUPON PORTION ABOVE, ANY PAYMENT RECEIVED IN EXCESS OF "TOTAL PAYMENT DUE" WILL BE APPLIED AS A REDUCTION IN PRINCIPAL.

ACCOUNT ACTIVITY AND CHARGES DUE

Description/Date Range	Transaction	Amount	Balance	Rate	Amount Due
LOAN NUMBER	000-00-0001-8				
07-31-17 08-30-17	LOAN INTEREST		1,350,000.00	3.50%	4,068.75
				TOTAL DUE	\$4,068.75

Mortgage Interest

ACCOUNT STATEMENT



FIRST REPUBLIC BANK
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LOAN STATEMENT

For any address/phone changes check this box and indicate changes on reverse side.



bjt4a
00576

OZ 01
CASA TERESA INC
123 W MAPLE AVE
ORANGE CA 92866

RETURN SERVICE REQUESTED



499921021061067611710172503000000000464583

YOUR CHECKING ACCOUNT # XXXXXXXX8599 WILL BE CHARGED THESE AMOUNTS

FIRST REPUBLIC BANK

LOAN STATEMENT

Statement Date: September 18, 2017
Account Number: [REDACTED]

PAYMENT AND BALANCE SUMMARY

Payment Due Date	09/30/17	Principal	\$0.00
Current Payment Due:	\$4,645.83	Interest	\$4,645.83
Past Due Amount	\$0.00	Fees	\$0.00
Total Payment Due	\$4,645.83	Late Charge	\$0.00

*If "Total Payment Due" is not received by the end of your grace period, your loan may be assessed a late charge. See your loan agreement for details.

UNLESS DESIGNATED IN THE DETACHABLE COUPON PORTION ABOVE, ANY PAYMENT RECEIVED IN EXCESS OF "TOTAL PAYMENT DUE" WILL BE APPLIED AS A REDUCTION IN PRINCIPAL.

ACCOUNT ACTIVITY AND CHARGES DUE

Description/Date Range	Transaction	Amount	Balance	Rate	Amount Due
LOAN NUMBER	000-00-0001-8				
08-31-17 09-29-17	LOAN INTEREST	1,350,000.00		3.50%	3,937.50
				TOTAL DUE	\$3,937.50

Mortgage Interest

ACCOUNT STATEMENT



FIRST REPUBLIC BANK
It's a privilege to serve youSM

LOAN STATEMENT

For any address/phone changes check this box and indicate changes on reverse side.



OZ 01
CASA TERESA INC
123 W MAPLE AVE
ORANGE CA 92866

RETURN SERVICE REQUESTED



499921021061067611710196102000000000480069

YOUR CHECKING ACCOUNT # XXXXXXX8599 WILL BE CHARGED THESE AMOUNTS

FIRST REPUBLIC BANK LOAN STATEMENT

Statement Date: **October 19, 2017**
Account Number: **021061067**

PAYMENT AND BALANCE SUMMARY

Payment Due Date 10/31/17
Current Payment Due: \$4,800.69
Past Due Amount \$0.00
Total Payment Due \$4,800.69

Principal \$0.00
Interest \$4,800.69
Fees \$0.00
Late Charge \$0.00

*If "Total Payment Due" is not received by the end of your grace period, your loan may be assessed a late charge. See your loan agreement for details.
UNLESS DESIGNATED IN THE DETACHABLE COUPON PORTION ABOVE, ANY PAYMENT RECEIVED IN EXCESS OF "TOTAL PAYMENT DUE" WILL BE APPLIED AS A REDUCTION IN PRINCIPAL.

ACCOUNT ACTIVITY AND CHARGES DUE

Description/Date Range	Transaction	Amount	Balance	Rate	Amount Due
LOAN NUMBER	000-00-0001-8				
09-30-17 10-30-17	LOAN INTEREST		1,350,000.00	3.50%	4,068.75
				TOTAL DUE	\$4,068.75

Mortgage Interest

Unless designated in this section, any payment received in excess of "Total Payment Due" will be applied as a reduction in principal.

Payment Due Date* 10/31/17
Account Number **021061067**
Current Payment Due \$4,800.69
Past Due Amount \$0.00
Total Payment Due \$4,800.69
Additional Principal \$ _____
Other \$ _____
Total Amount Enclosed \$ _____