

**Exhibit C: Quarterly Status Report**

**YWCA Safe House/Encore Programs**  
**City of Santa Rosa Quarterly Reporting Form**  
**Quarter #:**

Submitted by:

Print name:

Date:

**Quarter End Date:**

**Safe House/Encore Demographics**

Total # of Safe House clients served:

# of Safe House adults served:

# of Safe House children served:

Total # of Encore Clients Served:

Total # of Beds:

Total # of Bed Nights:

**Utilization Data**

% of clients with permanent restraining order:

# of adults received individual therapy or peer counseling:

# of children received individual therapy or peer counseling:

# of adults attended support group:

% of participants safely housed without abuser upon exit:

% of participants safely housed to permanent housing location without abuser upon exit:

% of adults employed:

Narrative re outreach conducted or other information pertinent to the quarter: