

TOYRARIAN MONTHLY REPORT

(Please Print/Type) Center _____ Month/Year _____ Date Completed _____

Address _____ Phone _____

Number of days Center was open During Report Month:

Date	Number of Borrowers	Number of Toys Loaned	Number of Books Loaned	Number of Incentive Toys Given out	Number of Honor Toys Given out	Number of Toys Donated by Public	Number of New Registrations
TOTALS for Month							
Quarterly			January-March		April-June		July-September
Number of Toys On-hand/in Circulation							
Number of Toys Received from Headquarters							
Number of Toys Returned to Headquarters							
Toyrarian(s) Name		Number of Hours Worked in Report Month	Volunteer(s) Name			Number of Hours Worked in Report Month	



Comments / Remarks (use back of page/second page if additional space is needed)

MAIL, FAX OR EMAIL TO:
 TOY LOAN PROGRAM
 Attn: Juana Cornell-Ojalvo
 2615 South Grand Avenue, 2nd Floor
 Los Angeles, CA 90007

FAX: (213) 743-9998
 E-Mail: toyloan@dpss.lacounty.gov

Send in no later than the 5th day of the following month.