GOOD WORKS

Date of Activity	
Approximate Time of Activity	
Name, Email and Phone Number	
Number of Representative (e.g. parent, relative or guardian if under 18 y/o; ed prior to beginning any volunteer work, activity or making any donations)	Name, E
Name of Organization and/or Type of Activity	
y (round to nearest 15 minutes, e.g. one hour and ten minutes = 1.25 hours,	Hours Pe
two hours and thirty minutes =2.5 hours)	
Or	
Donation amount	
to be filled out by member; e.g. \$15/hour pay rate with a donation of \$45 would equal three hours equivalent volunteer or activity work)	Donatio
Or	
another member assisted upward (each level counts as one hour)	N
one number of Recipient, Witness, Organizational or Activity Representative	Nam
Signature of Volunteer	
unteer's representative (if under 18 y/o)	
ank you" from the recipient(s) and record it as a video along with any other they'd like to share. Video URL	•
a signature of Recipient, Witness, Organizational or Activity Representative:	

(If making a non-local donation where a signature is not available, please retain a copy of the receipt.)