

TEMPLATE

Volunteer Name _____

SETTLING-IN ALLOWANCE VOLUNTEER SURVEY

A. List items purchased with your settling-in allowance and actual cost to you.

ITEM (please list e.g., pillows, towels, etc)*	COST
1. Bedding/linen	
2. Kitchen supplies	
3. Radio/tape recorder	
4. Cleaning supplies	
5. Appliances	
6. Furniture	
7. Home furnishings	
8. Screens/security items	
9. Tools	
10. Other/misc*	
	TOTAL

B. Time period when items were purchased _____

C. List items considered necessary but which were not purchased because of insufficient funds (or purchased with own funds).

ITEM	ESTIMATED COST
1.	
2.	
3.	
4.	

Comments: _____

*Costs shown under "Other/misc." should not exceed 20% of the total.