



Donations

Date: _____

Donor

Donated by: Organization/Post/Chapter Individual (Please circle one)

Organization/Individual's Name: _____

Address: _____

Donation Description

Activity

Dollar Value of Canteen Books: _____

Dollar Value of Refreshments: _____

Misc. Prizes: _____

Check Cash Money Order

Check Number: _____

Check Date: _____

General Post Fund # _____

Field Service Receipt #: _____

In Memory of: _____

Designation: _____

Item(s) Donated. Please give a brief description and **estimated value**: _____

Disposition

Item(s) delivered to: _____

Received by _____

Ack Handed to Donor

Ack Mailed to Donor

Date: _____

Recreation Volunteer Sign-in Data Sheet

Activity:		
Place/Ward:	Time:	Date:

Names of Regularly Scheduled Volunteers: (Volunteers donating time at least once per month)

- | | |
|------------|------------|
| (1) _____ | (14) _____ |
| (2) _____ | (15) _____ |
| (3) _____ | (16) _____ |
| (4) _____ | (17) _____ |
| (5) _____ | (18) _____ |
| (6) _____ | (19) _____ |
| (7) _____ | (20) _____ |
| (8) _____ | (21) _____ |
| (9) _____ | (22) _____ |
| (10) _____ | (23) _____ |
| (11) _____ | (24) _____ |
| (12) _____ | (25) _____ |
| (13) _____ | (26) _____ |

Total Number of Regularly Scheduled Volunteers: _____

Total Number of Occasional Volunteers: _____

RETURN FORM TO VOLUNTARY SERVICE, 135!!!!	_____ Signature of Volunteer in Charge:
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