Ladies Auxiliary Volunteer Hours Log

Jan☐ Feb☐ Mar☐ Apr☐ May☐ Jun☐ Jul☐ Aug☐ Sep☐ Oct☐ Nov☐ Dec☐ Year: _____

Post #: _____
First/Last Name _____ _____
For mileage consideration - address of volunteer: _____

Date	Volunteer location address	Project Title/Grant#	Start Time	Finish Time	Total Hours	Mileage logged

Include total on last page.

Ladies Auxiliary Volunteer Hours Log: Total and turn in with grant report. 6/12/2017 AMM
Keep a copy for your personal mileage records for tax purposes.