

COMMUNITY SERVICE VOLUNTEER TIME SHEET

Organization Name:			
Address:	Telephone		

Community Service Hours

Date	Description of Work	Location	Supervisor	No. of Hours

Supervisor_____

(Print Name)

Client

(Print Name)

Supervisor_____

(Signature)

Client

(Signature)

This form must be mailed or faxed to your property manager at the address below:

Salt Lake County Housing Authority 3595 South Main Street Salt Lake City, Utah 84115

Fax Number: 284-4406

Warning: Title 18, Section 1001 of the United States Code, states that a person is guilty of a felony for knowingly and willingly making false or fraudulent statements to any department or agency of the United States.