S S E	Volunteer Timesheet	Please return timesheets using this schedule.		
FROTTE COST	THE CON		Date Due	
Your Name (Please print)		• Oct/Nov/Dec • Jan/Feb/Mar	January 8 April 8	
At what agency did you work?		Apr/May/Jun Jul/Aug/Sep	July 8 October 8	
	(If you volunteer at more than one agency, <u>please make a copy of this form for each agency/location</u>)	Volunteers returning timesheets by <i>Date Due</i> will be eligible		
What job(s) did you perform?	(Please be specific)	for drawing for g to local rest		

Please check box if you plan to itemize your tax deductions and would like for us to write you a letter at the end of the calendar year (reporting your mileage associated with volunteering).

Note: You must list any mileage you wish to claim under "IRS Miles" columns, beside the appropriate Date / Hours below.

ſ	Month			Month		, <u> </u>	Month		E-mail
Date	Hours	IRS Miles	Date	Hours	IRS Miles	Date	Hours	IRS Miles	address
									RECORD UPDATE <i>Please indicate any change/addition below:</i>
									Florida Seasonal
									Address:Street
									City State Zip
									Telephone Number:
									If seasonal resident: Month of arrival in FL
									Month of departure from FL
									Volunteer Signature Date
									Volunteer Coordinator
Totals			Totals			Totals			Signature Date (person at the site where you volunteer)

Please return timesheet to RSVP in person, by U.S. mail, fax (941-613-0255) or visit www.friendshipcenters.org