



Monthly Documentation Form

Volunteer Name: _____

Month: _____ Year: 20____

Date	# of Hours	Agency	Task Performed

Thanks to you, we are *Getting Things Done!* Please help us show that great things are getting done in our community by recording your hours. RSVP serves as a proactive voice for seniors. By tracking your hours of service, we make the government and the public aware of the positive impact seniors are having in our community. Submit hours in order to remain active with RSVP.

Volunteer Signature _____

Please return this form to Volunteer Fox Cities within 10 days after the month ends.
Mail, fax or e-mail your hours. Ask about on-line reporting!



RSVP/Volunteer Fox Cities
2616 South Oneida Street, Suite 2, Appleton, WI 54915
Phone: (920) 832-9360 Fax: (920) 832-9317
rsvp@volunteerfoxcities.org