



VOLUNTEER ACTIVITY LOG

Reporting Period: _____ (year)

January-March April-July

August-September October-December

Name: _____

Date	Time(s)	Entity Name	Type of Activity	Verifier Name	Verifier Signature	Phone#

Last 4 of SSN: _____

Date	Time(s)	Entity Name	Type of Activity	Verifier Name	Verifier Signature	Phone#

Date	Time(s)	Entity Name	Type of Activity	Verifier Name	Verifier Signature	Phone#

Signature

Date

Last 4 of SSN: _____