

FLORIDA RETIRED EDUCATORS ASSOCIATION

Individual Member Volunteer Services Hours Report

Volunteer Name: _____

Year _____

JANUARY

REA	_____	REA	_____	_____
Civic/Club	_____	Civic/Club	_____	_____
Hospital	_____	Hospital	_____	_____
Schools	_____	Schools	_____	_____
Church	_____	Church	_____	_____
All Others	_____	All Others	_____	_____

TOTAL _____

FEBRUARY

REA	_____	_____
Civic/Club	_____	_____
Hospital	_____	_____
Schools	_____	_____
Church	_____	_____
All Others	_____	_____

TOTAL _____

MARCH

REA	_____	_____
Civic/Club	_____	_____
Hospital	_____	_____
Schools	_____	_____
Church	_____	_____
All Others	_____	_____

TOTAL _____

APRIL

REA	_____	REA	_____	_____
Civic/Club	_____	Civic/Club	_____	_____
Hospital	_____	Hospital	_____	_____
Schools	_____	Schools	_____	_____
Church	_____	Church	_____	_____
All Others	_____	All Others	_____	_____

TOTAL _____

MAY

REA	_____	_____
Civic/Club	_____	_____
Hospital	_____	_____
Schools	_____	_____
Church	_____	_____
All Others	_____	_____

TOTAL _____

JUNE

REA	_____	_____
Civic/Club	_____	_____
Hospital	_____	_____
Schools	_____	_____
Church	_____	_____
All Others	_____	_____

TOTAL _____

JULY

REA	_____	REA	_____	_____
Civic/Club	_____	Civic/Club	_____	_____
Hospital	_____	Hospital	_____	_____
Schools	_____	Schools	_____	_____
Church	_____	Church	_____	_____
All Others	_____	All Others	_____	_____

TOTAL _____

AUGUST

REA	_____	_____
Civic/Club	_____	_____
Hospital	_____	_____
Schools	_____	_____
Church	_____	_____
All Others	_____	_____

TOTAL _____

SEPTEMBER

REA	_____	_____
Civic/Club	_____	_____
Hospital	_____	_____
Schools	_____	_____
Church	_____	_____
All Others	_____	_____

TOTAL _____

OCTOBER

REA	_____	REA	_____	_____
Civic/Club	_____	Civic/Club	_____	_____
Hospital	_____	Hospital	_____	_____
Schools	_____	Schools	_____	_____
Church	_____	Church	_____	_____
All Others	_____	All Others	_____	_____

TOTAL _____

NOVEMBER

REA	_____	_____
Civic/Club	_____	_____
Hospital	_____	_____
Schools	_____	_____
Church	_____	_____
All Others	_____	_____

TOTAL _____

DECEMBER

REA	_____	_____
Civic/Club	_____	_____
Hospital	_____	_____
Schools	_____	_____
Church	_____	_____
All Others	_____	_____

TOTAL _____

Please call/email each month to report hours or turn in at general meeting:

VS Chairman: _____ Phone #: _____ Email: _____