

Sample Volunteer Tracking Form

_____ (Organization Name)
 Receipt Voucher for In-Kind Contribution of Volunteer Services

Name of Volunteer		Month/Year	
Address		Activity	
City		Organization	
Phone Home ()	Phone Work ()		Cell Phone ()
Check one:	<input type="checkbox"/> Specialized Skills	<input type="checkbox"/> Non-specialized skills	

Detailed Record of Volunteer Hours Worked

Date	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15		Total Hours	Hourly Rate*	Total Value	
Volunteer Hours																				\$
Date	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31				
Volunteer Hours																				\$
TOTAL VALUE: \$																				

1. On the back of this page, please describe the type of volunteer services performed on each of the days noted above.
2. By my signature below, I certify that I served as a volunteer to this organization for the hours as noted above and did not receive compensation for my services.

Volunteer Signature _____ Date _____

3. By my signature below, I acknowledge receipt of the above-mentioned volunteer services.

Authorized Employee _____ Date _____

*For volunteers providing specialized skills for which they would have otherwise have been paid, value their time based on the salary or fee charged for such services. This hourly rate must be corroborated through independent documentation. Such documentation could include a copy of the volunteer's current payroll information or pay stub, fee schedules, salary studies for the service being offered, etc. The documentation must be more than just a statement by the volunteer.

**For volunteers providing services that do not require specialized skills, use the volunteer rate provided by the Independent Sector or more specific comparable wage data provided by the U.S. Bureau of Labor Statistics or other independent sources.

