## VOLUNTEER ACTIVITY LOG

Date	Client Name	Volunteer Name	# Hours	Location Traveled	# Miles
M/D/Y	Last, First	Last, First		Address & City	
Volunteer's SignatureDate_					
	onal forms you can print them by going to our v		ick on Volu	nteer.	
You can also complete the form on line and submit it to us electronically by using this website.					
-	ted on this form in order for you to use to track				
Please return form to the SRS Office at 1802 16th Street, Greeley or Fax to 352-5437 no later then the 7th day of the following month					
	your Activity Log by the 7th of the month we e	, , , ,			
Turning in your information in a timely fashion helps us in writing our grants, so we can continue to help our Seniors.					
Thank You for taking your time to volunteer. You are greatly appreciated by us and all the Seniors.					
Senior Resource Services		970-352-9348	1802 16t	h Street Greeley, CO	80631