



1407 Blair Street
Hollidaysburg, PA 16648
Phone: (814) 696-0877 x 5

Volunteer (In-kind) Report Form

Name: _____

Signature: _____

Date	Mileage	Hours	Miscellaneous Costs	Explanation of Activity

Total Miles _____ x \$ _____ = \$ _____

Total Hours _____ x \$ _____ = \$ _____

Total Miscellaneous Expenses = \$ _____ Grand Total: \$ _____

In the table above, please indicate the date, the total number of miles accumulated on your vehicle for that date, the total number of hours spent volunteering including travel time, other expenses incurred as a result of your volunteering efforts, and a brief explanation of that date's activities. At the bottom of the table, add the total number of miles from all the days and then multiply that number by \$0.54 (the current government rate for mileage reimbursement). Then, add the total number of hours from all of the days and multiply that by \$23.56 (the most recent (2016) estimated value of volunteer time as published by Independent Sector). Any other expenses should also be added and totaled.

Coordinator Signature _____ (date)