R.S.V.P. TIME SHEET

Volunteers of America Alaska Retired & Senior Volunteer Program

Name: Last _____ First _____Volunteer #: V- _____

Address: _____City: _____, **AK** Zip: _____

Phone: (907) _____ Month: _____ **Year: 2012**

Mileage Reimbursement: Y □ N □ or Tax Receipt: Y □ N □ or Anchor Rides: Y □ N □ or Bus Pass: Y □ N □

Volunteer Station(s)	Job Description Volunteer Duties	Hours served	Auto Miles	Meals
Please Total Hours, Mileage & Meals.				

Volunteer Signature: _____

Supervisor Signature: _____

Complete the time sheet and return to RSVP by the 15th of the month. Thank you for all you do for RSVP!

RSVP For Office Use Only Do Not Write In This Box.				
Time Sheet Received	Mileage Check	Tax Receipt	Anchor Rides	Bus Pass
	$_____	_____ Miles	_____ Tickets	$_____

Return To: VOA AK RSVP By Mail: 1675 C Street, Suite #201, Anchorage, AK 99501-5153
or Fax: 907-279-0148 or Email: rsvpvolunteer@voaak.org
Questions or Concerns Call: 907-274-RSVP (7787) or 907-279-9630