

KARSP General Kansas Volunteer Hours Report Form District 8

Name: _____ **Date:** _____

Address: _____

City: _____, KS **Zip:** _____

Phone number: _____ **E-mail address:** _____

Record and report the number of volunteer hours you give to your community for the year. Don't forget to include planning and travel time in your hours.

TOTAL Number of volunteer hours: _____

Estimate the number of your total hours that are with youth: _____

If you are an at large KARSP state member and do not have a unit - please send this information to the KARSP Community Service Chair by April 30.

Kay Sewell, KARSP Community Service Chair.

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Email totals to: aksejm@outlook.com