

Volunteer Service Hours Validation Letter

Date: [Insert Date]

[Volunteer's Name]

[Volunteer's Address]

[City, State, Zip Code]

To Whom It May Concern,

This letter is to verify that [Volunteer's Name] has volunteered with [Nonprofit Organization Name] from [Start Date] to [End Date]. During this time, [he/she/they] contributed a total of [Number of Hours] hours to our organization.

Throughout [his/her/their] service, [Volunteer's Name] was involved in [brief description of duties or projects]. [He/She/They] demonstrated a high level of commitment and dedication to our mission.

We greatly appreciate the efforts and contributions of [Volunteer's Name] and affirm that the hours served are accurate as per our records.

If you have any questions or require further information, please feel free to contact me at [Your Phone Number] or [Your Email Address].

Sincerely,

[Your Name]

[Your Position]

[Nonprofit Organization Name]

[Organization's Address]

[City, State, Zip Code]