Volunteer Hours Contribution Receipt

Date:	-
This is to acknowledge that:	
Volunteer Name:	
Address:	
Has contributed a total ofperiod of:	hours of volunteer service to Organization Name during the
From:	_ To:
Service Description:	
This volunteer service has grea	atly benefited our organization and the community.
Thank you for your dedication	and support!
Sincerely,	
Authorized Signature:	
Title:	_
Organization Name:	
Contact Information:	