



# RSVP

## Volunteer Hourly Report

Friendship Centers of Emmet County- RSVP - 1322 Anderson Road, Petoskey, MI 49770  
231-347-3211 ext. 129 or 130 – Fax 231-347-3795

*You may fax or phone in your hours, or you may email the information to:*  
[mmhornbaker@emmetcoa.org](mailto:mmhornbaker@emmetcoa.org) or [christy@emmetcoa.org](mailto:christy@emmetcoa.org)

Name: \_\_\_\_\_ Month/Year \_\_\_\_\_

**DON'T FORGET TO WEAR YOUR RSVP NAME BADGE. IF YOU NEED ONE PLEASE LET US KNOW!**

Again, welcome to AmeriCorps Seniors RSVP! Check us out on Facebook “Friendship Center of Emmet County, Council on Aging”, and on our website [emmetco.org/rsvp](http://emmetco.org/rsvp).

Date	Station Where are you volunteering?	Volunteer Activity Description What are you doing?	Hours	Mileage *	V R	V I S

**\* Please check here if you request reimbursement. Supervisor’s signature required for each station for which you claim mileage. Due to auditing requirements, mileage cannot be reimbursed to anyone who does not have a supervisor’s signature on their time sheet.**

Supervisor Signature \_\_\_\_\_  
 Supervisor Signature \_\_\_\_\_  
 Supervisor Signature \_\_\_\_\_

**\*Note: Please mail or deliver this hourly sheet to RSVP by the 5<sup>th</sup> of the month.**

**Mileage can be claimed for the miles from the volunteer’s home to the station and from the station to the volunteer’s home. RSVP staff may, at their discretion, check mileage claimed against Google Maps mileage.**

**(Volunteer signature required for ALL sheets, even if mileage reimbursement is not requested.)** By signing below, I certify that this statement, and the mileage amounts claimed are true, correct and complete to the best of my knowledge. I certify that I possessed a valid driver’s license and that liability insurance in the minimum amount required by law was in force at the time of this travel.

**\* VOLUNTEER SIGNATURE:** \_\_\_\_\_ **Date** \_\_\_\_\_

<b>Date</b>	<b>Station Where are you volunteering?</b>	<b>Volunteer Activity Description What are you doing?</b>	<b>Hours</b>	<b>Mileage *</b>	<b>V R</b>	<b>V I S</b>

\* VOLUNTEER SIGNATURE: \_\_\_\_\_ Date \_\_\_\_\_

Volunteer signature is required for auditing purposes and reimbursement.