COUNTY OF HENRICO
DEPARTMENT OF HUMAN RESOURCES
VOLUNTEER SERVICES PROGRAM

Monthly Volunteer Attendance Form

Instruction: Please list the names of all volunteers who have contributed one (1) or more hours this month to your Department and indicated each day's total hours. Please total all hours worked by all volunteers in the space marked "Grand Total." This form should be submitted to the Human Resources Department (Fax#: 501-7200) by the 5th of each month. Thank You!

Department: _____ Section: _____

Supervisor: _____ Month/Year: _____

Volunteer Names	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	Total

(May 2013)