

**MORE AT FOUR**  
**Cleveland County Partnership for Children**  
**Receipt Voucher for In-Kind Contribution of PROFESSIONAL Volunteer Services**

Name of Volunteer \_\_\_\_\_

Month/Year \_\_\_\_\_

Address \_\_\_\_\_

Project Name \_\_\_\_\_

City \_\_\_\_\_

Organization \_\_\_\_\_

Phone ( ) \_\_\_\_\_ ( ) \_\_\_\_\_  
 Home Work

**Detailed Record of Professional Volunteer Hours Worked**

Date	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15		Total Hours	Hourly Rate*	Total Value
<b>Volunteer Hours</b>																		\$	\$
Date	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31			
<b>Volunteer Hours</b>																		\$	\$
<b>TOTAL VALUE: \$</b>																			

1. On the back of this page, please describe the type of volunteer services performed on each of the days noted above.

2. By my signature below, I certify that I served as a volunteer to this organization for the hours as noted above and did not receive compensation for my services.

Volunteer Signature \_\_\_\_\_

Date \_\_\_\_\_

3. By my signature below, I acknowledge receipt of the above-mentioned volunteer services.

Authorized Employee \_\_\_\_\_

Date \_\_\_\_\_

\*Volunteers that are providing services for which they would have otherwise have been paid, should value their time based on the salary or fee charged for such services. This hourly rate must be corroborated through independent documentation. Such documentation could include a copy of the volunteer's current payroll information or pay stub, fee schedules, salary studies for the service being offered, etc. The documentation must be more than just a statement by the volunteer in order to meet the audit standards.

\*\*To compute an hourly rate for someone that is paid on an annual salaried basis, take the total salary and benefits and divide by 2080. That amount is the hourly rate to be used in valuing the individual's time.

