



## VOLUNTEER ACTIVITY REPORT

\_\_\_\_\_ COUNTY

Event / Activity: \_\_\_\_\_

Event Start Date: \_\_\_\_\_ Event Start Time: \_\_\_\_\_

Event End Date: \_\_\_\_\_ Event End Time: \_\_\_\_\_

Number of Members Participating: \_\_\_\_\_

Description of Event / Activity (Attach each event / activity letter, agenda, or other information available.)

Names of All Participating Members:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Total Number of Hours Spent by Each Member:

Total Hours \_\_\_\_\_  
Total Hours \_\_\_\_\_  
Total Hours \_\_\_\_\_  
Total Hours \_\_\_\_\_  
Total Hours \_\_\_\_\_  
Total Hours \_\_\_\_\_

(If more than eight members participated, please complete an additional Form for this event/activity.)

Total Volunteer Hours for this Event/Activity \_\_\_\_\_

Completed by: \_\_\_\_\_, County Farm Bureau Secretary

County Farm Bureau President \_\_\_\_\_

County Farm Bureau President Signature: \_\_\_\_\_

Women's District Chair Signature: \_\_\_\_\_