

# OREGON EAGLE VOLUNTEER REPORT

## INDIVIDUAL

Auxiliary/Aerie: Sutherlin Eagles 3508

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Function needs to be as specific as possible for example: driving a neighbor to the doctor, preparing/serving food/beverages at the Eagles, assisting family members outside of your home, cleaning the office, filing, selling tickets, etc. Helping a family member at your address is not applicable. If you are not sure of the cash value of the donation, please leave it blank. Note: Officer related duties are not applicable.

DATE	FUNCTION	HOURS	MILES	\$DONATION
Totals:				