SERVICE HOURS SUMMARY

FAMILY NAME: (Please print)	 no.	
STUDENT NAME(S) / GRADES:		

DATE	ACTIVITY	TIME/\$\$ SPENT	VOLUNTEER HOURS	PTC SERVICE CREDIT
September 3rd	Help in library	2.5 hours	X	
October 25th	Teacher Lunch / Purchased Food	\$20.00 = 1 hour(receipt attached)		X
Sept. 29	Worked PTC kids booth at Fall Festival	3 hours	X	X
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