

Community Service Report Form

Group Community Projects

Local Union name _____

Reporting date _____

Contact name _____

Contact number _____

Volunteer names _____

Project description

Benefiting organization _____

Cost of donation materials/supplies (if appropriate) _____

Number of total volunteer hours _____

Comments:

Check all applicable boxes and provide information for all checked boxes.

Please fax to (614) 227-8747 attention Joan Fluharty, Labor Liaison, United Way of Central Ohio, or email an electronic copy joan.fluharty@uwcentralohio.org, as often as you can!!

Questions? Call Joan at (614) 227-2729. THANK YOU FOR YOUR CONTRIBUTION!