

MARION COUNTY SHERIFF'S OFFICE VOLUNTEER TIME LOG



VOLUNTEER NAME: _____ ID#: _____
(LAST) (FIRST)

DIVISION: _____ MONTH / YEAR: ____/____

DATE	TIME IN	TIME OUT	# OF HOURS	ACTIVITY
Total Hours =				

VOLUNTEER'S SIGNATURE: _____ DATE: _____

SUPERVISOR'S SIGNATURE: _____ DATE: _____

PLEASE TURN THIS FORM INTO VOLUNTEER SERVICES

**Activity block should explain how volunteer time was obtained.