Form F: Record of Meeting Attendance

Agreement No: _____ Recipient: _____ Payment Request _____ Page _____ of _____

Purpose of Meeting: _____ Date of Meeting: _____

Name (please print)	Representing	No. of Hours at Meeting	Signature (required)

ELEMENT NUMBER _____ TOTAL VOLUNTEER HOURS: _____ X $15.00 = $_____

Enter the value computed in the lower right hand box on Form C1 for the appropriate element.