



Data Collection Survey of Volunteer, Youth, Charitable and Community Service Programs

Committee: _____

Date: _____

(A) Program: _____

(B) Number of Participants

(C) Number of Elks

(D) Number of Helpers

(E) Total Elk Hours

(F) Total Helper Hours

(G) Elk Miles

(H) Helper Miles

(I) Non-Cash Contributions

(J) Cash Donations

Column (A) Describe Program

Columns (B) thru (D) Count individuals — not couples, teams or groups.

Columns (E) and (F) Indicate total hours — If 6 Elks worked 6 hours (6 x 6 = 36 total hours)

Columns (G) and (H) Mileage traveled in preparation for an event itself.
(Number of people times round trip miles.)

Column (I) Cash value of contributions including hall donations, food, band, clothing, bingo, parties, gifts, eyeglasses — Do not include hours or mileage.

Column (J) Actual cash, checks, money orders or purchase value of savings bonds donated.

Submitted by: _____

Must be completed and returned to the Secretary by the meeting following the program.

“Elks Care — Elks Share”