

**Androscoggin Retired Educators Association (AREA)  
Volunteer Hours Reporting Form**

*Please record the number of hours below that you spend volunteering or participating in physical activities each month.*

**Name:** \_\_\_\_\_

**Volunteer Hours**

May _____	November _____
June _____	December _____
July _____	January _____
August _____	February _____
September _____	March _____
October _____	April _____

**Total Volunteer Hours** \_\_\_\_\_

**Physical Activity Hours**

May _____	November _____
June _____	December _____
July _____	January _____
August _____	February _____
September _____	March _____
October _____	April _____

**Total Physical Activity Hours** \_\_\_\_\_

**Return this form by April 1 to:**

Joyce Bucciantini  
PO Box 352  
Greene, ME 04236  
joyce.bucciantini@gmail.com