VOLUNTEER TIME SHEET

COUNCIL ON AGING
Lake County

NAME: **SITE:**

CONGREGATE MEALS (ON-SITE LUNCH PROGRAM) (SERV, NSREG, CLUP)					**HOME DELIVERED MEALS (MEALS ON WHEELS)** (MOWP & MOWD)				
DATE	CODE	IN	OUT	HOURS	DATE	CODE	IN	OUT	HOURS
			Total hrs.					**Total hrs.**	

VOLUNTEER SIGNATURE: DATE:

VERIFIED BY: DATE:

POSITION CODES

SERV	Serving	**MOWD**	Meals on Wheels Driver
NSREG	Nutrition Site Registration	**MOWP**	Meals on Wheels Packer
CLUP	Clean up		