



City of Dayton
2026 Community Engagement Grant Program
Volunteer Service Record

Project Name:	
Organization:	

Volunteer Name:	
Address:	
Phone:	
Email address:	

Date of Service:		
Description of Service Performed:		
Start Time:	End Time:	Total Hours:

Date of Service:		
Description of Service Performed:		
Start Time:	End Time:	Total Hours:

Volunteer Signature:	
Date:	
Signature of Project Representative:	
Representative Name:	
Date:	

FOR OFFICE USE ONLY

Date Received:

Value of Service (\$29.95/hr):