

## **VOLUNTEER HOURS DAILY COLLECTION FORM**

EVENT (FEMA Disaster Number)					1	PAGE of		
VOLUNTEER + DONATED RESOURCES COORDINATOR (VDRC)					CONTACT PHONE #		CONTACT EMAI	
LOCATION/SITE ADDRESS			PERIOD C			NG to		
VOLUNTEER ORGANIZATION					DESCRIPTION OF ELIGIBLE WORK PERFORMED			
ORGANIZATION CONTACT					CONTACT PHONE #		CONTACT EMAI	L
VOLUNTEER NAME	HOURS WORKED			LC	CATION WORKED		DESCRIPTION OF WORK PERFORMED	
Please read before signing: I have received safety instructions for working at this site and agree to follow the safety procedures and the directions of the site supervisor.	TIME IN	TIME OUT	TOTAL HOURS	Provide Add	dress/Location of Worksite with Zip Code	Please Provide a Specific Descripton of Work Performed (Debris Cleanup + Removal, Roof Tarping, Sand Bagging, Repair, etc.) *		
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DAILY TOTAL HOURS



GOVERNOR'S OFFICE OF HOMELAND SECURITY & EMERGENCY PREPAREDNESS



Volunteer + Donated Resources - Offsetting Non-Federal Share

# VOLUNTEER HOURS DAILY COLLECTION FORM

#### HOW TO COMPLETE THIS FORM

- **Event:** Enter the FEMA Disaster Number.
- **Parish:** Enter Parish where volunteer work was performed.
- **Page \_ of \_ :** Enter page number of current page and pages of entire document.
- Volunteer and Donated Resources Coordinator (VDRC): Enter the name of the VDRC who will be receiving this data form from the Organization Contact.
- Contact Phone #: Enter phone # of VDRC.
- Contact Email: Enter email address of VDRC.
- Location/Site Address: Enter the address where volunteer work was performed.
- **Period Covering \_ to \_ :** Enter period of time covered on this data form.
- **Volunteer Organization:** Enter the name of the organization volunteers performed work under.
- **Description of Eligible Work Performed:** Enter a specific description of work performed eligible work performed.

- **Organization Contact:** Enter name of the Volunteer Organization Contact that is collecting the data for this form.
- **Contact Phone #:** Enter phone # of Organization Contact.
- **Contact Email:** Enter email address of Organization Contact.
- Volunteer Name: Read provided instructions before signing last and first name of volunteer.
- Hours Worked: Enter time in, time out and total hours for each designated volunteer.
- **Location Worked:** Enter the address of the location volunteer work was performed.
- **Description of Work Performed:** Enter a specific description of work performed by designated volunteer.

#### **EXAMPLES OF INELIGIBLE ACTIVITIES + DONATIONS**

- Debris removal on private property **EXCEPT if** *Private Property Debris Removal* (PPDR) **policy is approved by the Federal Coordinating Office** (FCO) **for the disaster in the designated area**.
- Feeding volunteers doing ineligible work.
- Volunteer firefighters working within their own districts.
- Emergency repairs to **private property**.
- Unapproved donation warehouse and POD activities.

[SOURCEs: FEMA Donated Resources Criteria for Public Assistance + 44 CFR 13.24]

If in doubt about eligible activities and/or donations, document anyway. It is better to over document rather than under.

### EXAMPLES OF ELIGIBLE ACTIVITIES + DONATIONS

- Removing eligible debris from public property.
- Filling and placing **sandbags**.
- Muck and gut, mold work.
- Warehouse and **logistical** support.
- Supply distribution.
- Shelter and feeding operations.
- Search and rescue when part of an organized search and rescue operation.
- Professional safety inspections.
- Others.

[**SOURCEs**: *FEMA Donated Resources Criteria* for Public Assistance + 44 CFR 13.24]

Reasonable logistical support for volunteers doing eligible work, such as donations warehousing and management related to eligible Emergency Work, MAY - subject to FEMA approval - be eligible for either:

- **Funding** If the Subrecipient (Applicant) provides the logistical support; OR
- As a **donation credit** If a third party provides the logistical support.

[SOURCE: FEMA Public Assistance Program and Policy Guide (PAPPG) FP 104-009-2 / April 2017, page 36-37]