# CERTIFIED VOLUNTEER UNITS

## Personal CVU Log

**Name** ______________________________ **County:** _______________

**Address** ______________________________________**Phone:**____________

**City** ___________________________ **State** _____ **Zip** _____________

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Please check the guidelines when reporting volunteer hours
to make sure you report them correctly.

| Date of Vol. Activity | Type of Volunteer Activity | Hrs. of Vol. Time | # of People Reached |
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~ DO NOT TURN THIS SHEET IN ~

Keep this copy for your file; transfer total hours to the "CVU Volunteer Service Summary."