AUSTIN RETIRED TEACHERS ASSOCIATION

INDIVIDUAL RECORD OF COMMUNITY VOLUNTEER SERVICE

Name: _____ Total Hours Reported: ____

MONTH	HOURS GIVEN	MONTH	HOURS GIVEN
January		July	
February		August	
March		September	
April		October	
May		November	
June		December	
lease submit	your information	in one of the fo	ollowing four way
ostal:	Bring:		

To the monthly meeting **AND** hand to Marsha

Email:

Marsha Lyons-Gray

Austin, TX 78759-8101

3901 Amy Circle

Marsha_gray@att.net

Text:

(512) 924-2049

Deadline for counting hours: December 31, 2024 **DEADLINE FOR SUBMITTING FORM:** January 24, 2025