



Make copies as needed

Data Collection Survey of Volunteer, Youth, Charitable and Community Service Programs

Committee: _____ Date: _____

- (A) Program: _____
- (B) Number of Participants
- (C) Number of Elks
- (D) Number of Helpers
- (E) Total Elk Hours
- (F) Total Helper Hours
- (G) Elk Miles
- (H) Helper Miles
- (I) Non-Cash Contributions
- (J) Cash Donations

- Column (A)** Describe Program
- Columns (B) thru (D)** Count individuals — not couples, teams or groups.
- Columns (E) and (F)** Indicate total hours — If 6 Elks worked 6 hours ($6 \times 6 = 36$ total hours)
- Columns (G) and (H)** Mileage traveled in preparation for an event itself.
(Number of people times round trip miles.)
- Column (I)** Cash value of contributions including hall donations, food, band, clothing, bingo, parties, gifts, eyeglasses — Do not include hours or mileage.
- Column (J)** Actual cash, checks, money orders or purchase value of savings bonds donated.

Submitted by: _____

Must be completed and returned to the Secretary by the meeting following the program.

“Elks Care — Elks Share”