



1488 State Route 444, Victor, NY 14564

Volunteer Quarterly Time Card

	20__
1 st Quarter	1/1 – 3/31
2 nd Quarter	4/1 – 6/30
3 rd Quarter	7/1 – 9/30
4 th Quarter	10/1 – 12/31

Name: _____ **Email:** _____

Street: _____

City: _____ **State:** _____ **Zip:** _____

Phone: (_____) _____ **Vol. Position(s):** _____

Month: _____ 20_____

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday

Monthly Total: _____

Month: _____ 20_____

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday

Monthly Total: _____



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Volunteer Quarterly Time Card

Name: _____ **Email:** _____

Month: _____ **20** _____

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday

Monthly Total: _____

Include your travel time to and from Ganondagan or Ganondagan Event volunteering at.

Please return this form to:

Ganondagan State Historic Site Visitor's Center

-OR- Email information to friends@frontiernet.net

Via paper mail to Friends of Ganondagan, P.O. Box 113, Victor, NY 14564

by the 15th of the month following the conclusion of this report.

Office Use:

of Trips: _____ **Quarterly Hours Total:** _____

Notes: _____
