

DOCUMENTATION OF DONATED TIME OR IN-KIND SERVICES

Florida Archaeology Month 2010

(Use This Form to Report Non-Professional or Professional Hours ONLY)

Return to:
Florida Archaeology Month 2010
c/o Chris Newman
504 17th Street
St. Augustine, FL 32095
Or email - guppy@aug.com

Grant Project Title: **Florida Archaeology Month 2010**

Name of Volunteer: _____

Type of Work Performed: _____

Period Beginning: _____ Period Ending: _____

FOR NON-PROFESSIONALS: (Work performed for FAM outside your area of professional expertise)
(Use the Federal Minimum Hourly Wage Rate - \$7.25 in the table below.)

FOR PROFESSIONALS: (Work performed in your area of expertise that contributes to FAM):
(Calculate Hourly Rate plus Benefits (if known) = \$ _____ for the hourly rate below.)

For Professionals Claiming a "Professional Rate" (not minimum wage): Please also
complete the following:

My profession is _____, my hourly rate for services is \$ _____.

Type of Work Performed	Total Hours	Hourly Rate	Value (Hours x Rate)

Total Hours Claimed: _____

Total Amount Claimed \$ _____

Date _____ Signature of Worker _____

Date _____ Signature of Project Supervisor _____