

Iowa Department of Human Services

ANNUAL VOLUNTEER REPORT: INSTITUTIONS

Name of Institution	Name of Volunteer Director	Year
Purpose of Institution		
Summarize briefly volunteer services provided by persons who are not members of groups.		

Complete for each volunteer group

Name of group	Number of volunteers	Number of hours served
Summary of Services		

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Name of group	Number of volunteers	Number of hours served
Summary of Services		

Signature

Date