



Today's Date: _____

To Whom It May Concern:

The following named individual has assisted our organization/department on a volunteer basis. The dates of volunteering and hours are as listed below. If you should have any questions please do not hesitate to give us a call at (785) 232-5754.

Volunteers Name _____

Date(s) of Volunteering	Time of Volunteering From To	Total Hours Volunteered

Grand Total of Volunteer Hours _____

Total Volunteer Mileage _____

Sincerely,
Printed Name: _____

Signature: _____

Title (circle one): Senior Pastor Assistant/Associate Pastor

Youth Pastor Education Pastor Minister of Music

Worship Arts Director Outreach Center Director Drama Coordinator

Marketing Director Signing Ministry Coordinator

Choir Director Finance Director



920 S.E. SHERMAN AVENUE
TOPEKA, KANSAS 66607
PHONE: 785.232.5754
FAX: 785.232.5754

E.T. "TOM" WATSON, III
PASTOR

