VOLUNTEER TRANSPORTATION STIPEND

OLD COLONY PLANNING COUNCIL
70 SCHOOL ST.
BROCKTON, MA 02401-4097

VOLUNTEER_____
STREET / P.O. BOX_____
TOWN, STATE ZIP_____

Please return to the Council on Aging @ 230 Webster St. Marshfield, Ma 02050 Att: Dottie Wiedmann, by the 1st of the month for the previous month.

DATE	PURPOSE OF THE TRIP	DESTINATION	CLIENT NAME	CLIENT ADDRESS	VOLUNTEER HOURS	MILES

FOR OFFICE USE ONLY

DIRECTOR'S SIGNATURE	DATE	TOTAL MILES	TOTAL MILES x 58.5 CENTS =