



# VOLUNTEER HOURS TRANSMITTAL MEMO

(Please note that any part of an hour qualifies as one hour of service.)

**To:** Erica Rodriguez  
 on behalf of Sue Loudis  
 Coordinator  
 Partnerships and Volunteers

**From:** \_\_\_\_\_  
 Campus Volunteer Liaison Name  
 or  
 PTA Volunteer Chairman Name

**Volunteer records from:**

**For the month of:**

\_\_\_\_\_ Campus or department

\_\_\_\_\_ 2010-2011 school year.

THE TOTAL NUMBER OF HOURS RECORDED FOR THE MONTH IN THE FOLLOWING CATEGORIES ARE:	
Category	Number of Hours
V-Soft System	
Additional Hours not in V-Soft	
Total number of hours for the month	

**Comments or Questions:** \_\_\_\_\_

\_\_\_\_\_  
 \_\_\_\_\_

Send via email to [Erica.Rodriguez@springbranchisd.com](mailto:Erica.Rodriguez@springbranchisd.com) or in district mail to the Administration Building c/o Community Relations Dept. or 713-251-2468 (Amy Byrom)