

Due Tuesday, March 30th

Fax: (415) 905-1610 Phone: (415) 905-1611

PREP DAY VOLUNTEER ESTIMATE FORM

Your Name: _____

Project Code: _____ Your Daytime Phone Number: _____

Prep Day: Saturday, April 10th

Unskilled Community Volunteers: # of volunteers you have _____ # of volunteers needed _____

Lunch: Are you providing lunch? **Yes** ____ **No**, have them bring a bag lunch _____

Starting time: _____ Ending time _____

Carpenters # _____ Hours _____

Plumbers # _____ Hours _____

Plastering # _____ Hours _____

Electrical # _____ Hours _____

Other (please specify)

_____ # _____ Hours _____

_____ # _____ Hours _____

Prep Day: Saturday, April 17th

Unskilled Community Volunteers: # of volunteers you have _____ # of volunteers needed _____

Lunch: Are you providing lunch? **Yes** ____ **No**, have them bring a bag lunch _____

Jump-Start starting time: _____ Jump-Start ending time _____

Carpenters # _____ Hours _____

Plumbers # _____ Hours _____

Plastering # _____ Hours _____

Electrical # _____ Hours _____

Other (please specify)

_____ # _____ Hours _____

_____ # _____ Hours _____

Prep Day: Other Date – Please Specify:

Unskilled Community Volunteers: # of volunteers you have _____ # of volunteers needed _____

Lunch: Are you providing lunch? **Yes** ____ **No**, have them bring a bag lunch _____

Starting time: _____ Ending time _____

Carpenters # _____ Hours _____

Plumbers # _____ Hours _____

Plastering # _____ Hours _____

Electrical # _____ Hours _____

Other (please specify)

_____ # _____ Hours _____

_____ # _____ Hours _____

_____ # _____ Hours _____