**INDIVIDUAL NON-FEDERAL SHARE CONTRIBUTIONS**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| **USE A SEPARATE LINE FOR RECORDING TIME, MATERIALS, SPACE, or ITEMS - USE SEPARATE FORM FOR EACH MONTH** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Received for the month of: | | | | | | | |  | | | | | | | | | Classroom: | | | |  | | | | | Site: | | |  | | | | | | | | **Tax ID 91-0820018** | | | | |
| **You MUST select one:** | | | | | | | PARENT | | | | | | FAMILY | | | | | COMMUNITY | | | | | | OTHER | | | | | | |  | | | | | | | | | | |
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| Date | | Description of Voluntary Contribution | | | | | | | | | | | | | | | | | | | | | | | | | Hrs/Units | | | | | | Unit Rate | | | | | | Total | | |
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| Date | | Mileage Non-Federal Share | | | | | | | | | | | | | | | | | | | | | | | | | Total Miles | | | | | | Unit Rate  $0.50 | | | | | | Total | | |
|  | |  | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | |  | | | | | |  | | |
| Print name: | | | | | |  | | | | | | | | | | | | | | | | | | | | | Phone: | | | | | | |  | | | | | | | |
| Address: | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| City: |  | | | | | | | | | | | | | | | | | | State: | | | |  | | | | | | | | | Zip code: | | | |  | | | | | |
| **Volunteer / Donor signature:** | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | Date: |  | | | | | |
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| This is to certify the above person has contributed the listings above, having a value of: $ | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | |  | | | |
| **Validated by agency representative:** | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | Date: |  | | | | | |
| ***This form may serve as a receipt for qualified tax deductible donations.*** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Non-Federal Share Rate Schedule for Volunteer Services (**Services typically provided by parent and family volunteers) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| \*Board of Directors/Policy Council | | | | | | | | | | | $107.25 | | | | Clerical assistance | | | | | | | | | | $18.00 | | | | | Transportation | | | | | | | | | | $19.09 | |
| Classroom assistance | | | | | | | | | | | $17.00 | | | | Facility/maintenance assistance | | | | | | | | | | $20.78 | | | | |  | | | | | | | | | |  | |
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| **For Internal Use Only** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Program** | | | **Percentage** | | | | | |  | **Dollar Amount** | | | | | | | | | |  | | **Notes** | | | | | | | | | | | | | | | | | | | |
| HS | | |  | | | | | | $ |  | | | | | | | | | |  | |  | | | | | | | | | | | | | | | | | | | |
| EHS | | |  | | | | | | $ |  | | | | | | | | | |  | |  | | | | | | | | | | | | | | | | | | | |
| ECEAP | | |  | | | | | | $ |  | | | | | | | | | |  | |  | | | | | | | | | | | | | | | | | | | |
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| **Program** | | | **Dollar Amount** | | | | | | | | | | |  | | **Notes** | | | | | | | | | | | | | | | | | | | | | | | | |
| GAAP | | |  | | | | | | | | | | |  | |  | | | | | | | | | | | | | | | | | | | | | | | | |
| HS | | | $ | |  | | | | | | | | |  | |  | | | | | | | | | | | | | | | | | | | | | | | | |
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| ECEAP | | | $ | |  | | | | | | | | |  | |  | | | | | | | | | | | | | | | | | | | | | | | | |
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| *EOCF shall not discriminate in its staff, hiring practices, board, volunteers, volunteer committees, or recipients of any service on the basis of a person’s race, color, religion, sex, sexual orientation, age, national origin, marital status, veteran status, mental, physical, or sensory disability, or any other status not listed, as protected by state and/or federal law.* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Non-Federal Share Hourly Rate Schedule for Volunteer Services - continued** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | | **Services Typically Provided by Community Volunteers** | | | | | | | Accounting/Auditor | $ | 71.08 | Gardener/Groundskeeper | $ | 23.89 | | Audiologist | $ | 65.93 | \*\*\*Interpreter (sign language) | $ | 84.50 | | Auto Body Painter | $ | 43.05 | \*\*\*Interpreters | $ | 48.21 | | Auto Mechanic | $ | 53.10 | Lawyer | $ | 106.17 | | Bank Manager (local) | $ | 117.00 | Librarian | $ | 53.95 | | Childcare | $ | 12.11 | Nurse, LPN | $ | 36.27 | | \*\*Chiropractor | $ | 88.40 | Nurse, Registered | $ | 60.20 | | Cook | $ | 23.50 | Nurse Aide, Orderly | $ | 22.36 | | Computer Programmer | $ | 77.18 | Occupational Therapist | $ | 68.36 | | Construction/Laborer | $ | 46.82 | Optician | $ | 34.06 | | \*\*Counselor (Mental Health) | $ | 41.88 | Optometrist | $ | 115.83 | | Dental Assistant | $ | 30.22 | Painter | $ | 38.92 | | Dental Hygienist | $ | 60.43 | Pharmacist | $ | 92.09 | | Dentist | $ | 117.00 | Physical Therapist | $ | 70.83 | | Dietician | $ | 49.20 | Physician | $ | 117.00 | | Drafter | $ | 48.13 | Police Officer | $ | 56.68 | | Drafter/Designer | $ | 46.37 | \*\*Principal | $ | 80.06 | | Electrician Technician | $ | 52.41 | \*\*Psychologist (school, clinical, counselor) | $ | 70.23 | | Engineer | $ | 94.17 | \*\*Teacher | $ | 52.24 | | Firefighter | $ | 50.27 |  |  |  | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| All hourly rates include 30% for benefits; Rate based on Chief Executives, Elementary and Secondary Schools  (<http://data.bls.gov/cgi-bin/print.pl/oes/current/oes111011.htm>)  \*Rate based on Chief Executives, Elementary and Secondary Schools (<http://data.bls.gov/cgi-bin/print.pl/oes/current/oes111011.htm>), median + 30% for benefits  \*\*Rate based on Occupational Details (http.//data.bls.gov/oes/datatype.do040611.htm  \*\*\*Rate based on Northwest Interpreters, Inc. 040411 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |