

Community Service Clothing Donations

Name: _____ Grade: _____

Total Number of Hours: _____ Date: _____

Parent Signature: _____

Organization: _____

Item	Quantity	@	Standard	=	Total
Coats/sweaters/sweatshirts		@	0.5 each	=	
Shirts		@	0.1 each	=	
Pants/shorts		@	0.1 each	=	
Skirts/dresses		@	0.1 each	=	
Suits		@	1.0 each	=	
Shoes		@	0.5 each	=	
Mittens/hats		@	0.1 each	=	
Blankets/sleeping bags		@	0.5 each	=	
Other		@		=	

Grand Total= _____

How do you feel about your service? _____

****This form must be completed and turned in to your CSC representative in order for the hours to be recorded****