

## BOARD IN-KIND AND EXPENSE REPORT

*In order to meet our required 100% match of our Federal NEH funding, we request that this form be completed each time you volunteer your time for Florida Humanities.*

*This form must be **SIGNED** and returned along with **RECEIPTS** to Brenda O'Hara at [bohara@flahum.org](mailto:bohara@flahum.org) or 599 2nd St South, St Petersburg, FL 33701.*

*To find this form online go to [www.floridahumanities.org/board](http://www.floridahumanities.org/board) and click on Forms and Resources.*

NAME: \_\_\_\_\_

The services below must be accompanied by an invoice or signed letter with listed services provided

Date of Event	Short Description of your service	\$65 per hr Volunteer			\$.14 per mi		RECEIPTS MUST BE ATTACHED (travel = flights, taxi, parking,tolls)			Check Box to be reimbursed		Professional Services Hrs	Professional Hrly Rate
		Hours	Amount		Mileage	Amount	Lodging	Travel	meals				
1			\$ -										
2			\$ -										
3			\$ -										
4			\$ -										
5			\$ -										
6			\$ -										
7			\$ -										
8			\$ -										
9			\$ -										
10			\$ -										
11			\$ -										
12			\$ -										
TOTALS			\$ -		-	\$ -	\$ -	\$ -	\$ -		\$ -	\$ -	

By signing below, I confirm that I have spent the above hours and expenditures on activities for Florida Humanities in my role as a board member. I understand that the above listed donated amounts will be used to match the federal dollars that Florida Humanities receives.

\_\_\_\_\_  
Signature Date