## Monthly Participation Record



River Woods Housing Co-op
Reset Form

| Member Name | Date (Day) | Hours | Task Performed | Committee |
| :--- | :--- | :--- | :--- | :--- |
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|  |  |  |  | - |
|  |  |  |  | - |
|  |  |  |  | - |

Total hours of monthly participation perform by unit.


* Hours are to be entered in increment of 15 minutes ( 0.25 hours)

15 minutes $=0.2530$ minutes $=0.5 \quad 45$ minutes $=0.75 \quad 60$ minutes $=1.00$
$\square$ I declare that all the information provided in this form is true and accurate.

Member Name/ Signature: $\square$ Date (Month/Day/Year)


This form may be filled/submitted manually or electronically. Electronic submissions are to be sent to: riverwoodsboard@gmail.com. This form MUST be submitted to the board email address OR to the Office by the 1 st Friday of the following month. If no form is received for your unit, you will not be credited with any Participation for that month! Tasks may be verified by Committee Chairs to ensure tasks were actually performed.

