Dear Volunteers,

Thank you for all your hard work to help women get screened for breast and cervical cancer. We want to make sure that we capture all the good work you are doing so we can tell the Center for Disease Control and Prevention (CDC) about it. We need your help to do that! Please take the time to complete this match form. Instructions are below.

We want to connect with you online to share resources, education materials, and event notifications but we need your email address to do that. Please put your name and email address here:

Name: _____

Email address: _____

How to calculate Volunteer Hours: When you turn in volunteer hours remember that all of this can count! The hours that you spent:

- at the event,
- planning the event,
- promoting the event,
- making things for the event,
- totaling in-kind and volunteer hours and filling out the WVBCCSP forms
- and traveling to and from the event.

When you calculate in-kind donations what can count? Goods or services donated or purchased by volunteers to support WVBCCSP events.

- Raffle Prizes
- Speaker or survivor gifts
- Food
- Gas you used to travel while planning, promoting, and hosting the event
- The event space you are using to have the event Either report how much you paid to rent the space or if you got the space donated for free, ask the venue what they would normally charge to rent the site for a private gathering like a family reunion and report that price.
- Decorations that were purchased by you or your group or donated to you or your group.
- Performances If you have a band play at your event and they normally charge \$200.00 to perform but they play for you for free you can count that \$200.00 as an in-kind donation.

Please return forms within one month after your event.

You can mail a paper copy to:

WVBCCSP ATTN: Charlene Hickman, Director 350 Capitol St., Rm. 427 Charleston, WV 25301

You can also email an electronic copy to Charlene Hickman at charlene.m.hickman@wv.gov.

If you have questions about the form, please call **304-414-0607** and we will be happy to help.

WVBCCSP Volunteer Match Form

Please return forms to Charlene Hickman within one month after your event.

Name of Event:

Place Event was held: (city, county)

Contact for Event (Name, email, phone number, mailing address):

In-Kind Donations: In kind donations are items that are donated to your event. Examples:

- a local café donates sandwiches and lemonade
- a local business donates a raffle basket

The value of an in-kind donation is calculated based on how much you would have to pay for this item if you bought it for full price in a store. The value of handmade items such as art, jewelry, crafts, quilts, etc... should be determined by the artist who made it.

Name of Item Donated	Donated by:	Value of Item
Example: Food for Luncheon	Local Café	\$500.00

In kind donation worksheet

Name of Item Donated	Donated by:	Value of Item
Example: Food for Luncheon	Local Café	\$500.00

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Volunteer Hours: Volunteer hours are the time that you spend planning, organizing, running, and doing the report out for your event.

When you donate your time to WVBCCSP you help us meet requirements for our grant. It is important that we capture all of the time our volunteers spend working on BCAM events. Example:

- I spent about 3 hours every day for 2 weeks to get ready for this event. 3 hours x 14 days = 42 hours
- On the day of the event, I worked from 8 am until 6 pm setting up, running the event, and cleaning up. Add 10 hours
- I spent 2 hours filling out paperwork and reporting on the event with my WVBCCSP contact. Add 2 hours
- I volunteered a total of 54 hours of my time on this event.

Remember to capture all the hours that your friends and family spend helping out too!

Some volunteers such as nurses, doctors, nurse practitioners, and professionals who do their jobs at your event can be counted at a higher per hour rate. This table will help us calculate these higher rates. There are some examples in the blue boxes to help you get started.

Volunteer	Community	Nurse	Doctor	Nurse	Professional	Total Hours
Name	Member			Practitioner		Volunteered
		A Nurse who	A Doctor	A Nurse	A professional	
		provided	who	Practitioner	who	This includes
		education,	provided	who provided	volunteered to	the number
		was a guest	education,	education,	work your	of hours
		speaker, or	was a guest	was a guest	event doing	planning,
		provided	speaker, or	speaker, or	their	doing, and
		screening	provided	provided	profession	reporting
		services at	screening	screening	(example: a	
		your event	services at	services at	photographer	
			your event	your event	volunteered to	
					take pictures	
					at your event)	
Mary Smith	Put up flyers	n/a	n/a	n/a	n/a	20 hours
Dr. Evans		n/a	Guest	n/a	n/a	3 hours
			Speaker			
Dan Jones		n/a	n/a	n/a	Florist- did decorations	12 hours
Betty Phipps	Event organizer					25 hours

Volunteer	Community	Nurse	Doctor	Nurse	Professional	Total Hours
Name	Member			Practitioner		Volunteered
		A Nurse who	A Doctor	A Nurse	A professional	
		provided	who	Practitioner	who	This includes
		education,	provided	who provided	volunteered to	the number
		was a guest	education,	education,	work your	of hours
		speaker, or	was a guest	was a guest	event doing	planning,
		provided screening	speaker, or provided	speaker, or provided	their profession	doing, and reporting
		services at	screening	screening	(example: a	reporting
		your event	services at	services at	photographer	
		,	your event	your event	volunteered to	
					take pictures	
					at your event)	

Donating space to hold meetings and events is one way that people can help.

Did anyone donate space for you to have planning meetings or to have your event?

How much would you normally have to pay to rent that space?

Total Value of Donated Space_____

If the Media covered your story or advertised your event that helps too!

Our event was covered or advertised by:

Please circle one

0	Newspaper	Name of Paper
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- How many days did the story or ad run? _____
- Local TV Station
 Name of Station_____
 - Did they do a story or an interview? _____

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0	Radio Station	Name of Station

- How many times did the story or ad run?
- Organization Newsletter Name of Newsletter_____