



H.O.N.O.R.

HELPING OUR NEEDY ONES RESPECTFULLY, INC.

3032 Westmoreland Dr., Lakeland, Fl. 33810 / Polk County (863)816-2779 / Pinellas County (727)631-4997

Team Leader Worksheet

Name: _____ JOB # _____

Phone: _____ - _____ - _____ Cell Phone: _____ - _____ - _____

Address: _____ City: _____ State: _____ Zip: _____

Alt Contact Name: _____ Phone: _____ - _____ - _____

Materials Used:

<u>Item</u>	<u>Qty</u>	<u>Item</u>	<u>Qty</u>	<u>Item</u>	<u>Qty</u>
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

EXPENSES (Place all receipts in envelope)

<u>Vendor:</u>	<u>Date</u>	<u>Amount</u>	<u>Vendor:</u>	<u>Date</u>	<u>Amount</u>
_____	___/___/___	_____.	_____	___/___/___	_____.
_____	___/___/___	_____.	_____	___/___/___	_____.
_____	___/___/___	_____.	_____	___/___/___	_____.

TIME Total Job Expense: \$ _____.

<u>Volunteers Name:</u>	<u>Date</u>	<u>Tot Time</u>	<u>Volunteers Name:</u>	<u>Date</u>	<u>Tot Time</u>
_____	___/___/___	_____.	_____	___/___/___	_____.
_____	___/___/___	_____.	_____	___/___/___	_____.
_____	___/___/___	_____.	_____	___/___/___	_____.
_____	___/___/___	_____.	_____	___/___/___	_____.
_____	___/___/___	_____.	_____	___/___/___	_____.
_____	___/___/___	_____.	_____	___/___/___	_____.

Total Volunteers Utilized: _____ Total Job Time: _____ hrs: _____ min

Notes: