

TIME/MATCH RECORD

FOR TIME PERIOD: _____

TO: _____

We value the time you spend between weekend sessions to complete homework assignments, review the resource materials, and communicate/exchange information with policymakers on disability related issues.

This time is converted to dollars based on your hourly wage if you are employed; or minimum hourly wage if you are a volunteer, not working, or working but not receiving at least the minimum hourly wage.

The information you provide on this form helps us meet the match requirement for the grant that funds the Partners in Policymaking program. To the best of your ability, please estimate the time you spend working on each activity.

HOMEWORK TABLE

| DATE | TIME | EST. NO. OF HOURS | ACTIVITY | HOW DID YOU ACCOMPLISH ACTIVITY? <i>(Phone, email, social media, letter, meeting, etc.)</i> |
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| TOTAL HOURS | | | | |

COMPLETE, SIGN, DATE, AND BRING THIS FORM TO THE NEXT WEEKEND SESSION:

Name (printed) _____

Name (signed) _____

Date _____

Hourly Wage (If not working, write "none") \$ _____