

ST. JUDE PARTICIPATION HOURS SUBMISSION FORM	
CREDIT HOURS TO FAMILY: (LAST NAME)	DATE WORKED:
OLDEST CHILD'S FIRST NAME:	IN GRADE:
NAME OF PERSON WHO WORKED:	
START AND FINISH TIME OF WORK:	TOTAL HOURS:
CATEGORY OR TYPE OF WORK:	
CATEGORY MANAGER OR PERSON WHO AUTHORIZED THIS JOB:	
AUTHORIZED SIGNATURE (category manager)	

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