Mentoring Family/Child Contacts

For statistical tracking, we appreciate knowing the time spent with your mentored child.

Mentor Name & Child Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Month/Year: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Date | Start Time | End Time | Type of Contact  (Face to Face / Phone / Other) | Mileage  (if any) | Type of Activity | Donated Goods Value  (if any) |
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Total Number of Contacts: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Total Time Spent (Hours): \_\_\_\_\_\_\_\_\_\_\_\_

Total Mileage: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Total Donated Costs:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please submit to Families Plus via:

Email - [familiespluscolorado@gmail.com](mailto:familiespluscolorado@gmail.com)

Mail -115 Grand Ave., Ste 2., Delta, CO 81416

Thank you so much for your help!