



**NAMA Committee Volunteer
Proof of Service Verification Letter**

Volunteer Name _____

NAMA Member ID Number _____

NAMA COMMITTEE SERVED ON _____

DATE RANGE OF SERVICE _____ to _____

TOTAL NUMBER OF HOURS SERVED _____

Description of Volunteer Service Performed

NAMA Committee Chair Name _____

Title _____
(Chair of committee, Membership Director or Executive Director)

Volunteer Signature _____

Date _____

Committee Chair Signature _____

Date _____