

# SAN JUAN COUNTY FIRE DEPARTMENT

## VOLUNTEER FIREFIGHTER

### NOMINAL FEE PER CALL VOUCHER

**VOLUNTEER:** \_\_\_\_\_ **DISTRICT:** \_\_\_\_\_  
**MAIL CHECK TO:** \_\_\_\_\_

(Address)

(Town/State)

(Zip Code)

**MONTH:** \_\_\_\_\_ **YEAR:** \_\_\_\_\_

**DATE**

**WHERE/WHY/WHAT**

**(brief description of all activities)**

1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		
9.		
10.		
11.		
12.		
13.		
14.		
15.		
16.		
17.		
18.		
19.		
20.		
21.		
22.		
23.		
24.		
25.		
26.		
27.		
28.		
29.		
30.		

**TOTAL ACTIVITIES** \_\_\_\_\_ **AMOUNT PER ACTIVITY \$** \_\_\_\_\_ **ea.** \_\_\_\_\_ **TOTAL \$** \_\_\_\_\_

I SWEAR THAT THE ABOVE IS A TRUE AND CORRECT ACCOUNTING OF MY RESPONSE TO EMERGENCY CALLS, DISTRICT OR COUNTY WIDE MEETINGS, ADMINISTRATIVE DUTIES AND FIRE DEPARTMENT TRAINING.

Volunteer (signature) \_\_\_\_\_

District Chief (signature) \_\_\_\_\_

County Fire Chief (signature) \_\_\_\_\_