Ca	MPUS PARTNERS	
Re: Ad	Account Number	
	FORM IS TO BE COMPLETED BY YOUR EMPLOYER AND ATTACHED TO YOUR REQUERMENT FOR VOLUNTEER SERVICE IN A NON-PROFIT ORGANIZATION.	JEST FOR
EMPLobelow.	_OYER: Please complete this form for the person named above by checking $()$ all applicable	statements
	The organization named below is exempt from taxation under Section 501(c)(3) of the International Code of 1954. (Number).	al Revenue
_	The person named above volunteers for this organization, and he/she serves low-income p their communities by assisting them in eliminating poverty and poverty-related human, environmental conditions.	
	The volunteer named above does not receive compensation that exceeds the rate prescribed section 6 of the Fair Labor Standards Act of 1938 (the federal minimum wage), except that the organization may provide health, retirement, and other fringe benefits to the volunteer that are sequivalent to the benefits offered to other employees of the organization.	tax-exempt
	The borrower, as part of his or her duties, does not give religious instruction, conduct worsh engage in religious proselytizing, or engage in fund raising to support religious activities.	ip services,
	The volunteer named above has agreed to serve on a full-time basis for a term of at least one years (from to).	ear
	Name of Organization	
	Address	
	City, State Zip	
	Signature and Title of Certifying Official	
	Date (SE	AL)

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