



ORDEN DE MALTA
CUBA

CERTIFICATION OF SERVICE HOURS WORKED

The undersigned hereby certifies as follows:

1. I am a member of the Cuban Association of the Order of Malta and have supervised _____ (the "Volunteer") in the performance of the service hours reflected on the attached Service Hour Reporting Form
2. The work reflected in the Service Hour Reporting Form was done at the request of the Cuban Association of the Order of Malta and was either:

_____ to the direct benefit of the poor and the sick; or

_____ necessary for the Cuban Association to be able to fulfill its mission to minister to the poor and the sick.
3. The Volunteer effectively worked _____ hours as reported on the attached Service Hour Reporting Form.

Date: _____

Name: _____