

**Alaska Sustainable Salmon Fund**  
**DONATED PERSONNEL\* MATCH FORM: THIRD PARTY**

AKSSF project number: \_\_\_\_\_

Project title: \_\_\_\_\_

Donated employee name: \_\_\_\_\_

Organization providing the employee: \_\_\_\_\_

Date of service: \_\_\_\_\_ Hours: \_\_\_\_\_      Date of service: \_\_\_\_\_ Hours: \_\_\_\_\_

Date of service: \_\_\_\_\_ Hours: \_\_\_\_\_      Date of service: \_\_\_\_\_ Hours: \_\_\_\_\_

Date of service: \_\_\_\_\_ Hours: \_\_\_\_\_      Date of service: \_\_\_\_\_ Hours: \_\_\_\_\_

Description of services performed:

Rate exclusive of overhead and profit (and fringe benefits for governmental organizations): \_\_\_\_\_

Total hours: \_\_\_\_\_      Total value claimed: \_\_\_\_\_

\_\_\_\_\_  
Donated employee signature and date

\_\_\_\_\_  
Donated employee supervisor's signature and date

To the best of my knowledge, the above-named individual performed the listed services for the above project during the stated time. Documentation establishing the employee's existing rate of pay for performing like services is attached.

\_\_\_\_\_  
Printed name and title of subrecipient representative      Signature and date

\*Donated personnel work for an employer other than the subrecipient and are paid for their services by that employer.