Troop 423 Service Event _____

Date: _____ **Hours:** _____

Brief Descrip of Event:_____

Organization Troop 423
partnered with (ie. TCC, Good Will, etc) _____

Location: _____**Organizer:**_____

Name	Scout	Adult Leader	Adult non-leader	Non-Scout	Hours	Notes
Name	Scout	Adult Leader	Adult non-leader	Non-Scout	Hours	Notes