



VOLUNTEER LOG SHEET

* ONE NAME PER SHEET
 * WORK MUST OCCUR IN DOOR COUNTY

Donated Work Hours

(office use)

Grant Project #:

Volunteer's Name: _____

Mailing Address: _____

Location/Address where work was performed: _____

Date	Description of Work Performed	Hours	(office use)	
			Rate	Total
12-Sep	Bundled and Herbicided Phragmites	4		
Total Value of Services Performed:		0		0

Date	Description of Equipment Used	Hours	(office use)	
			Rate	Total
12-Sep	Lopping Shears/Herbicide	4		
Total Value of Equipment Used:				

(Please see reverse side for additional space.)

I hereby certify that I performed the above listed donated services.

Signature of Volunteer

Date

I hereby certify that the donated services have been performed and that this claim is fair and correct.

Signature of Project Manager

Date

Return sheet to: Door County Soil & Water Conservation Department
 421 Nebraska Street
 Sturgeon Bay, Wisconsin 54235

Questions?: Call (920)746-5955 or e-mail dcist1@gmail.com

