## **Volunteer Time & Activity Report State Wildlife Grants-Vermont**

**Activity Description** 

Volunteer Category for Activity

John M. Buck

Subrecipient Grant #\_\_\_\_\_

Hours Worked Your

Dept ID: 6120021100

Subrecipient Grant title (if applicable)\_

Date(s)

Dept:

Use

Only

Fund: 20310

		(include prep time and other organizational efforts)	project related mileage	(e.g., field survey, monitoring, planning meeting, training)	(Project Leader please complete ) FOV=Field Observation FWT=F&W Technician WSV=Wildlife Specialist WBV=Wildlife Biologist
				Survey	FOV
	Totals				
for your	time, or your tir	ne is already being us	ed as a federa	ch required for the federal State Wildlife Grant (SWG) funds used I match for another program, please do NOT complete this form.  Jummarize your hours weekly. Please return the completed form	NOTE: You must record hours worked for each
Name (	Jame (print)			Address	·
Signati	are of Volunte	eer:		Signature of Project Leader:	

Program: 51036 Class: 70010 Project/ Grant: BIRD\_\_\_\_\_