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
-					
-					
-					
-	Teach				
	Totals				
for your	time, or your tir	ne is already being us	ed as a federal	ch required for the federal State Wildlife Grant (SWG) funds used match for another program, please do NOT complete this form. mmarize your hours weekly. Please return the completed form	NOTE: You must record hours worked for each
Name (ame (print)			Address	·
Signatı	are of Volunte	eer:		Signature of Project Leader:	

Return to: VCE c/o Eric Hanson, PO Box 22, Craftsbury VT 05826 (p) 802-586-8064. Volunteer Form version 1/10/2014

Program: 51036 Class: 70010 Project/ Grant: BIRD_