

| Grant Program for which hours are being tracked for (Check <u>One</u>): | | | ☐ (RTP) | ☐ (TSP) | ☐ (OH) | V) ☐ (SMTP) | ☐ (SNOW) |
|--|---------------------|---------------------------|----------------|------------------------------|-------------------------------|--------------------------------|----------|
| Date of Work | Volunteer Full Name | Short Description of Work | c Performed | Number of Hours Worked | Value (Hours x \$25/hr) | Volunteer Signature and | Date |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | rom this Form: | | | | |
| Name of Organization Holding FWP Award: | | | | | | Award Year: | |
| Award Contac | ct Name: | | Signature and | | | | |

The volunteer must provide his/her full name, signature, and date to certify the information is correct. Typed signatures are not acceptable.



| Grant Program for which hours are being tracked for (Check One): | | | ☐ (RTP) | ☐ (TSP) | ☐ (OHV) | ☐ (SMTP) | ⊠ (SNOW) | | | |
|--|------------------|--------------------------------------|------------------------|-------------------------------|---------|-------------|----------|--|--|--|
| Volunteer Name | : | | Volunteer Signat | Volunteer Signature and Date: | | | | | | |
| Date of Work | Hours Worked | Work Performed (e.g. Restoration and | d maintenance on Trail | l 388) | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| Total Hours Worked from this Log: Total Amount | | int Claimed as Match (| (Total Hours | Worked x \$25/H | our): | | | | | |
| Name of Organiz | ation Holding FW | P Award: | | | | Award Year: | | | | |
| Contact Name: | | | Signature : | and Date: | | | | | | |

The volunteer must provide his/her full name, signature, and date to certify the information is correct. Typed signatures are not acceptable.

A designee (contact) from the organization holding the award must provide his/her signature/date as concurrence. Typed signatures are not acceptable.

All fields must be completed for the hours to be eligible as match.