

NMVFO PROJECT SUMMARY

*Project Leaders complete and submit with signed project waivers within 10 days of completing project.**

Project Leader _____	Email or Phone No. _____
Project Name _____	Project Date(s) _____
Agency _____	Contact Name _____
Address _____	Contact Title _____
	Telephone No. _____
	Email Address _____

Work accomplished. Be specific and quantify, for example, number of miles of trail constructed or maintained.

Volunteer Hours

	Volunteer Name (alphabetical by last name)	Day 1	Day 2	Other Days	Total
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					
11.					
12.					
13.					
14.					
15.					
16.					
17.					
18.					
19.					
20.					
	TOTALS				

Instructions: Mail Summary and Release Forms to NMVFO, PO Box 36246, Albuquerque, NM 87176 or email to secretary@nmvfo.org.

Use additional pages if needed.