New Hampshire Department of Natural and Cultural Resources
Volunteer Program

PARTICIPANT LISTING AND VOLUNTEER WORK REPORT

Property_____

Trail(s)(if applicable)_____

Date/Time	Task	Total Hours	Volunteer's Printed Name (Group Use Only)	Volunteer's Signature (Group Use Only)

Please return form to: Volunteer Program, Department of Natural and Cultural Resources
Phone 603-271-3556 Fax: 603-271-3553 e-mail: Volunteer@dncr.nh.gov
Address: 172 Pembroke Road, P.O. Box 1856, Concord, NH 03301

Please use additional pages if necessary to list each member of the group that participated in the service project.

PARTICIPANT LISTING AND VOLUNTEER WORK REPORT, CONTINUED

Date/Time	Task	Total Hours	Volunteer's Printed Name (Group Use Only)	Volunteer's Signature (Group Use Only)

Notes/Details:

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_____ _____ _____
Volunteer Group Leader Signature Print Name Date

_____ _____ _____
Designated Service Supervisor Signature Print Name Date

_____ _____ _____
Authorized DNCR Personnel Signature Print Name Date

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