



California Association of 4WD Clubs, Inc.

ADOPT-A-TRAIL/VOLUNTEER PROJECT REPORT FORM

Mail to: CA4WDC, Inc., 8120 36th Ave., Sacramento, CA 95824

CONTACT INFORMATION:

Club/Organizer: _____

Contact Name: _____ Phone: _____

Email: _____ District: North Central South Out of State

PROJECT INFORMATION:

Trail/Road Name: _____

Location: _____ BLM Forest Service State Other

Instructions: Fill in the date, describe work accomplished, record total number of people. Record the hours per day (include meetings, travel time to and from project and hours worked).

Date	Work Description	Number of People	Hours Per Day	Total Hours	Dollars Spent
			# Vehicles	Miles Driven	Total Mileage
Date	Work Description	Number of People	Hours Per Day	Total Hours	Dollars Spent
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TOTALS		People	Hours	Dollars	Mileage