

**\*\*PLEASE PRINT CLEARLY\*\*FILL IN ALL INFORMATION\*\*PLEASE SIGN\*\***

## Division of Forestry and Wildlife Timesheet

Name: \_\_\_\_\_

Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_

Date	Description of Work Done	Time IN (Round to nearest .25)	Time OUT (Round to nearest .25)	Total Hours
1/19/26	Planting, weeding, interpretive trail restoration	8:00AM	12:00PM	4
Total Hours				4

\*I certify the above information is true  
to the best of my knowledge and belief.

\_\_\_\_\_  
Volunteer Signature

\_\_\_\_\_  
Date

Official Use Only

QC: \_\_\_\_\_

Date: \_\_\_\_\_

\_\_\_\_\_  
Supervisor Verifying Accuracy

\_\_\_\_\_  
Date