



CONSERVATION CLUB GRANT FINAL REPORT

(Must be submitted within **60** days after event)

GRANT ID NUMBER

PROPOSAL NUMBER

INSTRUCTOR/VOLUNTEER HOURS SUMMARY

NAME (PRINTED) _____

SIGNATURE _____

TIME RECORDED BELOW MUST BE LISTED PER DAY - DO NOT LIST DATE SPANS

DATE: / /

HUNTING/RECREATIONAL SHOOTING			FISHING/AQUATIC EDUCATION		
ACTIVITY			ACTIVITY		
HOURS TAUGHT	HOURS TRAVELED	HOURS PREPARATION	HOURS TAUGHT	HOURS TRAVELED	HOURS PREPARATION

DATE: / /

HUNTING/RECREATIONAL SHOOTING			FISHING/AQUATIC EDUCATION		
ACTIVITY			ACTIVITY		
HOURS TAUGHT	HOURS TRAVELED	HOURS PREPARATION	HOURS TAUGHT	HOURS TRAVELED	HOURS PREPARATION

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HUNTING/RECREATIONAL SHOOTING			FISHING/AQUATIC EDUCATION		
ACTIVITY			ACTIVITY		
HOURS TAUGHT	HOURS TRAVELED	HOURS PREPARATION	HOURS TAUGHT	HOURS TRAVELED	HOURS PREPARATION

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ACTIVITY			ACTIVITY		
HOURS TAUGHT	HOURS TRAVELED	HOURS PREPARATION	HOURS TAUGHT	HOURS TRAVELED	HOURS PREPARATION