GEORGIA
DEPARTMENT OF NATURAL RESOURCES
WILDLIFE RESOURCES DIVISION

Volunteer Timesheet (Group)

Name of Group: _____ **Group Leader's Name:** _____

Date: _____ **Description of Project:** _____

Name (Please Print)	E-Mail Address	Time		Hours	Miles (Driven to and From Work Site)	Signature
		Start	Finish			
Total Hours and Miles:						

To the best of my knowledge the information above is accurate.

_____ _____

Supervisor's Signature **Date**

WRD Use Only
(See back of timesheet for explanation of each block.)

_____ _____ _____

Block 1: Project Code **Block 2: Job Grade Code (A-O)** **Block 3: Section/Region or Program**

_____

Block 4: Qualify for Federal Match? (Yes/No/Don't Know)

Submit to Volunteer Coordinator at the end of each month.

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