



RETURN FORMS TO: Gabrielle Graeter 172 Davenport Rd Asheville, NC 28806 (828) 273-9097 gabrielle.graeter@ncwildlife.org

In-Kind Matching Services for Nongame and Endangered Wildlife Projects

N.C. Wildlife Resources Commission, Division of Wildlife Management Nongame and Endangered Wildlife Program

This information is needed to ensure that we continue to qualify for and receive funding for our nongame and endangered wildlife projects. Please fill in the following information and sign your name. Enter the number of **HOURS** you assisted with the project activity, the number of **MILES** you drove to and from the location, and the cost of any **MEALS** you paid for during the project activity. If you spent money on materials for the activity, enter the amount under **EXPENSES** and attach a receipt or an explanation. **Thank you**

for your interest and support of the North CarolinaNongame and Endangered Wildlife Program.

Name (Please Print - Last, First, MI)			Driver's License or Social Security #				
	Date	Volunteer Activity	Hours	Miles	Meals	Expenses	
1.							
2.							
3.							
4.							
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19.							
20.							

	Date	Volunte	er Activity	Hours	Miles	Meals	Expenses
21.							
22.							
23.							
24.							
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37.							
38.							
39.							
40.							
PLEASE CHECK		BOX TURTLE CONNECTION	Totals				
ONE		REPTILES		Hours	Miles	Meals	Expenses
BLOCK		OTHER		SUBMIT REPORTS ANNUALLY			
		ccuracy: I hereby certify th record to my volunteer part		on is correct to the	best of my know	wledge and re	epresents a

Volunteer's Signa		Date			
	NCWRC USE ONLY	,			
Nongame Project Leader/Biologist		D	Date		
Location of Activity		County	District		
Type of Activity	Number of Volunteers		FA Code		