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MISSOURI DEPARTMENT OF NATURAL RESOURCES DIVISION OF STATE PARKS

RECREATIONAL TRAILS PROGRAM CFDA 20.219

PROJECT NUMBER
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	DIVIDUAL AND VOLUNTEER TIME RECORD						
EMPLOYEE'S NAME							
JOB TITLE							
PROJECT SPONSO	R	RATE	RATE PER				
PROJECT SITE DATE							
DATE	DESCRIPTION OF WORK	TIME	AMOUNT DUE				
TOTAL							
SUPERVISOR'S SIGNATURE*							
EMPLOYEE'S SIGNATURE*							
* Must have both signatures to be valid							