



# NMVFO Project Summary Sheet

Project Name: \_\_\_\_\_  
 Project Leader: \_\_\_\_\_

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

**Volunteer Hours**

	Volunteer's Name	Day 1	Day 2	Other Days	Total
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					
18					
19					
20					
<b>TOTALS</b>					

**NOTE: Please alphabetize the project waiver forms to make it easier for data entry. Thanks!**