The following forms can be copied and used throughout the project if applicable.

ARKANSAS FORESTRY COMMISSION

Redesign 2009 Grant

Reimbursement Summary Sheet

Value of Donated Equipment

Project Number: UCF2009

Donor(s):

Date of Donation	Type & Size of Equipment	Total Hours Of Use	Hourly Rate	Value of Donation*	Signature of Equipment Operator

Total Value of Donation.....…_____

_____ _____

Verifying Official's Signature Date

* Hours of Use X Hourly Rate

ARKANSAS FORESTRY COMMISSION
Redesign 2009 Grant
Value of Donated Labor
Individual Time Sheet

Project Name: UCF2009			
Name of Person Contributing Donated Time		Type Of Work Performed	
Hourly Rate - Based On:			
A person donating their time to a project will be paid as a volunteer (AR rate $20.25/hr) unless they are professionally skilled in the work they are performing on the project (i.e., arborist providing technical assist, grant administrator organizing volunteers). When this is the case, the wage rate this individual is normally paid for performing this service may be charged to the project. For classroom participation list name of class and number of students.			
Date	Number of hours worked	Hourly rate	Total

Total Value of Donation _____

_____

Signature of person donating time Date

ARKANSAS FORESTRY COMMISSION
Redesign 2009 Grant
Value of Donated Labor
Group Time Sheet

Project Name: UCF2009

Name of Group Contributing Donated Time	Type Of Work Performed

Hourly Rate - Based On:

A person donating their time to a project will be paid as a volunteer (AR rate $20.25hr) unless they are professionally skilled in the work they are performing on the project (i.e., arborist providing technical assist, grant administrator organizing volunteers). When this is the case, the wage rate this individual is normally paid for performing this service may be charged to the project.

Date	Job Description	Number of participants	Number of hours worked	Hourly rate	Total

Total Value of Donation _____

_____

Signature of person supervising project Date