

**RAVALLI COUNTY OFF ROAD USER ASSOCIATION  
VOLUNTEER CONTRIBUTION REPORT**

DATE: \_\_\_\_\_

DESCRIPTION OF ACTIVITY (Include Road name and number if applicable):

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<b>Volunteer Name</b>	<b>Total Labor In Hours</b>	<b>Travel to site (Type vehicle AND mileage)</b>	<b>Travel on Trail/Road (Type vehicle AND mileage)</b>	<b>Equipment or Supplies Cost<sup>1</sup></b>

<sup>1</sup>Put additional details on equipment and supplies in the box below, itemize and include date paid on how it was paid. ATV/UTV/Side by use is now under “Travel on Trail/Road” and calculated at the OPM motorcycle rate.

Additional Information:

Submitter Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_

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