South Dakota Master Gardener Log Sheet

(Enter hours in appropriate column, see definition sheet of categories for assistance)

Name: Phone:		Email: County:					
Date	Brief Description (including location) of	I Educational	ength of .	Fime (Hrs) Your Own Continuing		Number of	

		Length of Time (Hrs)					
Date	Brief Description (including location) of	Educational	S	Your Own		Number of	
	Project or Activity	Outreach	Support Activities	Continuing Education	Other	Contacts	Mileage*
	TOTALS	0	0	0	0	0	0

^{*} Keep track of mileage for your own tax records. Check with IRS for deduction rates. (See below for guidelines on what counts towards your 50 hrs. payback.) Keep a copy of this sheet for your own records. Please turn these sheets into your local Cooperative Extension Office by November 1.