

TAFCE STATE PROJECTS COUNTY TOTALS REPORT

Summary of work done in 20_____.

Region: _____ County: _____

Due Date: February 1st

Send to: Cathy Shreve
Vice President of Programs
193 Windtrace Dr.
Cleveland, TN 37312

Name of person submitting: _____

Office / Title of person: _____

Address: _____

City: _____, TN Zip Code: _____

Phone Number: () _____ - _____

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COUNTY TOTALS

How many FCE members participated? _____

How many hours were volunteered? FCE members _____

Non-members _____

How many people were reached? FCE members _____

Non-members _____

What is the total amount spent? \$ _____