



Project Oregon -- Day of Event Report Form

Phone: 503-844-9571 ext. 336, Fax 1-866-590-7658

Event Date: _____

Email: monica@solveoregon.org Web: www.solveoregon.org

Project Site or Event Name: _____

Event Coordinator Name: _____

Event Coordinator Phone: _____ Type: _____ Home _____ Business _____ Mobile

Is this a school-based service-learning project? _____ yes _____ no

Brief description of what was accomplished and/or interesting highlights and stories:

Community groups and/or businesses that participated:

Name of Group or Business	# of Volunteers	In-Kind or Monetary Donation (list)

Volunteers:

Type	Number
Adult:	
Youth (0-17):	
Total	

Work Results:

Activity	Quantity	Invasive Species	Amount (area or # of roots dug up)
Trees Planted			
Shrubs Planted			
Plants Mulched			
Plants Caged			
Other:			

Trash Removed:

Type	Quantity (pounds)	Type	Quantity (pounds)
Mixed Waste (trash)		Glass (recycled)	
Tires (#, not pounds)		Plastics (recycled)	
Hazardous Waste		Metal (recycled)	
Other:		Paper (recycled)	



