In-Kind MATCH VEHICLE/EQUIPMENT Verification

Printed Name	Signature	Federal Equipment?		Date	Hours	Phone	Equipment/Vehicle Type	CWMA Project Area
		Yes	No	Dau	Hours	1 HUIIC	(make, model, year)	C WMA I Toject Aica
Accomplishments:		1						
certify that the in	formation is true	and corr	ect to th	e best of	my knowl	edge.		
Signature					Contact	Information	Date	