| State of Wisconsin                 |
|------------------------------------|
| Department of Natural Resources    |
| PO Box 7921, Madison WI 53707-7921 |
| dnr.wi.gov/org/caer/cfa            |

| Sheet | of | F |
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|       |    |   |

## Snowmobile / ATV Trail Aids Program **Trail Non-Grooming Maintenance Record**Form 8700-006 (8/06)

**Notice:** Completion and submission of the data requested on this form is necessary to document actual costs incurred and is authorized pursuant to s. 350.12(4)(bm), Wis. Stats., and NR 50.05(16), NR 50.09(4)(f)4. and NR 64.13(5), Wis. Adm. Code. Personally identifiable information collected will be used for program administration and may be made available to requesters as required under Wisconsin's Open Records law [ss. 19.31-19.39, Wis. Stats.]. The costs documented here will serve as the basis of grant reimbursement.

| Club / Contractor | County |
|-------------------|--------|
|                   |        |

| Date | Trail Name / No. | <b>Labor</b><br>(\$6.50 per hour) |        |                 | Equipment and Supplies (ATV, snowmobile, saw, tractor, truck, etc.) |  |                            |                |          |
|------|------------------|-----------------------------------|--------|-----------------|---|--|----------------------------|----------------|----------|
|      |                  | Work Description                  | Worker | Hours<br>Worked | Total \$  | Equipment / Supplies Description *Include DOT class number where | Hours<br>Used              | Hourly<br>Rate | Total \$ |
|      |                  | •                                 |        |                 | \$0.00  |  |                            |                |          |
|      |                  |                                   |        |                 | \$0.00  |  |                            |                |          |
|      |                  |                                   |        |                 | \$0.00  |  |                            |                |          |
|      |                  |                                   |        |                 | \$0.00  |  |                            |                |          |
|      |                  |                                   |        |                 | \$0.00  |  |                            |                |          |
|      |                  |                                   |        |                 | \$0.00  |  |                            |                |          |
|      |                  |                                   |        |                 | \$0.00  |  |                            |                |          |
|      |                  |                                   |        |                 | \$0.00  |  |                            |                |          |
|      |                  |                                   |        |                 | \$0.00  |  |                            |                |          |
|      |                  |                                   |        |                 | \$0.00  |  |                            |                |          |
|      |                  |                                   |        |                 | \$0.00  |  |                            |                |          |
|      |                  |                                   |        |                 | \$0.00  |  |                            |                |          |
|      |                  |                                   |        |                 | \$0.00  |  |                            |                |          |
|      |                  |                                   |        |                 | \$0.00  |  |                            |                |          |
|      |                  |                                   |        |                 | \$0.00  |  |                            |                |          |
|      |                  |                                   |        |                 | \$0.00  |  |                            |                |          |
|      |                  |                                   |        |                 | \$0.00  |  |                            |                |          |
|      |                  |                                   |        |                 | \$0.00  |  |                            |                |          |
|      |                  |                                   |        | 0               |   | Total I  | Total Equipment & Supplies |                | \$ (     |
|      |                  |                                   |        | Total<br>Hours  | Total<br>Labor \$   | Total Labor and Eq   | uipment &                  | Supplies       | \$       |