

**HACKETTSTOWN CLEAN COMMUNITIES PROGRAM
CLEAN UP ACTIVITY SUMMARY REPORT**

This information must be completed following your clean up in order to obtain funding:

Group Name: _____

Project Location: _____

Project Date: _____

Number of Participants: _____

Project Supervisor: _____

Hours spent at location: _____

Estimated miles covered: _____

Estimated number of bags (30 gallon) collected:

Mixed Recyclables: _____

Trash: _____

Total trash and recyclables: _____

Number of tires: _____

