

La Porte County Master Gardener Project Completion Report Form



Please return with expense receipts to
Master Gardener Treasurer when event is completed.
This information will be used to plan future budgets and events.

PURDUE EXTENSION
MASTER GARDENER PROGRAM

Event Name _____

Location _____

Date(s) _____ Project Coordinator _____

Purpose _____

Group Served _____

Volunteers for this event _____

Community Contacts _____

Expenses: Amount \$ _____ For _____ To _____

Amount \$ _____ For _____ To _____

Amount \$ _____ For _____ To _____

Amount \$ _____ For _____ To _____

Amount \$ _____ For _____ To _____

Amount \$ _____ For _____ To _____

Total Spent for this event \$ _____ # of learners attending _____

Please record any thoughts that would be helpful for someone who will work this event next year. _____

