

Oregon Nordic Club Trail Maintenance Transportation reimbursement form

The following person acknowledges receiving \$_____ cash as reimbursement for transportation to and from the trail tending party listed below.

Name _____

Signature of recipient _____

Trail maintained _____

Date _____

Return this form to the Trail Tending Coordinator.

Portland Chapter of the Oregon Nordic Club, Inc.
P.O. Box 3906, Portland, Oregon 97208
www.onc.org/pdx

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