



Keep Omaha Beautiful PROJECT COMPLETION FORM

(www.KeepOmahaBeautiful.org, 402.444.7774)

CONTACT INFORMATION

Group Leader Name _____

Name of Organization *(if applicable)* _____

Email _____

Phone Number _____

Home Address _____

Date of Project _____

TYPE OF PROJECT *(Please check the box)*

Litter Cleanup

Other _____

Only Rain Down the Storm Drain

PROJECT DETAILS

Location/Address of Project _____

of Youth Volunteers *(under 18)* _____ # of Total Hours Completed _____

of Adult Volunteers _____

Litter Cleanup

Only Rain Down the Storm Drain

of Trash Bags Collected _____ # of Trash Bags Collected _____

of Recycling Bags Collected _____ # of Decals Installed on Storm Drains _____

Miles of Trail Cleaned *(if applicable)* _____ # of Drains Cleaned ONLY *(no decals installed)* _____

Estimated % of Park Cleaned *(10-100%)* _____ # of Door Hangers Distributed _____

Other Activities Completed *(if applicable)* _____

FEEDBACK

We will email you a brief online feedback survey.

Please indicate that you will complete this brief survey for us by marking your initials below.

_____ *Initial*

SIGNATURE

Signature

Date

Please return this completed form when returning equipment. If no equipment needs to be returned, email a scanned copy of the form to [HelloKOB@cityofomaha.org](mailto>HelloKOB@cityofomaha.org) or mail to 1819 Farnam Street, Ste. #306, Omaha, NE 68183.