

Troop 599
Service Hours Earned



Please turn in to Mr. Vickery when completed

Scout Name (please print clearly)	
Date of Service	
Organization Serviced	
Hours Worked	
Type of Work Done	
Credit Towards	<input type="checkbox"/> Rank Advancement <input type="checkbox"/> Citizenship in the Community <input type="checkbox"/> Greenery Sales <input type="checkbox"/> 50 Miler Award <input type="checkbox"/> Other _____

Completed work must be approved by an adult present during the time worked, preferably the adult in charge of the service being performed:

Adult's Name (please print clearly)
Adult's Signature