Name of Event:

Date of Event:

1st Shift – Master Gardeners at Table (please sign below):

Contact Tally (Please equally split total contacts by # of MGs at the table when entering in VRS - e.g., if there are 75 total contacts and there are 3 MGs, each of you can “claim” 25 contacts):

***OSU Bee Advocate: # of handouts distributed, mentions of Bee Advocate program (estimate)***

2nd Shift – Master Gardeners at Table (please sign below):

Contact Tally (Please equally split total contacts by # of MGs at the table when entering in VRS - e.g., if there are 75 total contacts and there are 3 MGs, each of you can “claim” 25 contacts):

***OSU Bee Advocate: # of handouts distributed, mentions of Bee Advocate program (estimate)***

*Please return the completed form to Stormi Dykes (*[*stormi.dykes@oregonstate.edu*](mailto:stormi.dykes@oregonstate.edu)*).*