**CHEBOYGAN COUNTY ROAD COMMISSION**

***ADOPT-A-ROAD***

Organization Check Sheet

Organization _____

Contact Person _____

Assigned
Route _____

Video Received
on _____

Training
Conducted on _____

Training
Conducted by_____

Participant List
on File _____

Date
Assigned _____

Year_____

| | Pickup #1 | Pickup #2 |
|---|---|---|
| Scheduled: | _____ | _____ |
| Completed: | _____ | _____ |
| Vests Received: | _____ | _____ |
| Warning Letter: | _____ | _____ |
| Revoked/Cancellation: | _____ | _____ |