ACTIVITY FINAL REPORT

Complete this form and scan to the Nebraska Wing Administrator at wa@nebraskacivilairpatrol.org no later than 10 calendar days after the close of the activity. A copy of the NEWGF 310, Personnel Register, if used, must be attached to this report. Any additional pages are allowed to complete this form.

1. NAME OF ACTIVITY:

Date of Activity:		**POC(s) or Project Officer(s):**	

2. Contact Number of POC or PO:

3. # of Corporate Vehicles:		**# of POV(s):**		
4. # of CAP Personnel:		**# of Guest(s):**		

5. Other Agency Participation (if any):

6. Other Staff - List all Members and duty assigned at activity: (use additional sheet if necessary)

7. CAP Members Attendance - If NEWGF 310 is not used, list all members and CAPID's(use additional sheet if necessary)

NEWGF 310 Attached:	**Yes:**	**No:**	

8. Event Accomplishments: (use additional sheet if necessary)

Form submitted by:			
	NAME/RANK	TITLE	DATE

NEWG FORM 312(A) April 2015