# **2019 FARMERS MARKET INTERN ACTIVITY REPORT**

Please submit your report to info@farrms.org

We will not process your stipend until your experience report has been received.

Intern Name:

Farmers Market:

Date Report submitted:

Reporting on the period of: month/day\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ to month/day\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\*FARRMS does not pay mileage for travel to your host market. We do pay mileage to additional markets for data collection and to orientation. Mileage is calculated at rate of $.58/mile

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| **Markets Visited for Data Collection** |
| **Markets** | **# of customer contacts** | **# of miles roundtrip** | **Dates** |
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| **Activities at Host Market** | **Dates** |
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Intern Signature Date: \_

Farmers Market Manager Signature Date: \_