

DIY CLEANUP COVID-19 SUPPLEMENT



Cleanup Date: _____ Name of Cleanup Location: _____ Lat/Long: _____ N _____ W
 Total Participants: _____ Total Pounds of Trash + Recycling: _____ + _____
 Length of Area Cleaned (miles): _____ Cleanup Duration (hours): _____ Type: LAND / WATER

This form is an add-on to main datacard and is for specifically tracking trash items that have become increasingly common during the recent COVID-19 pandemic and response.

ITEMS COLLECTED	TALLY (i.e. IIII = 5)	TOTAL
COVID-19 PRIORITY ITEMS		
Disinfectant Wipes		
Latex Gloves		
Single-Use Mask with Filter		
Reusable Cloth Mask		
Reusable Gloves		
Single-Use Surgical Mask		

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