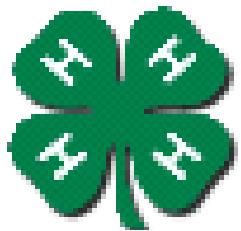


## Greene County 4-H Foundation

### 4-H Trip/Event Reimbursement Form



Date	Telephone Number	
4-H Member's Name	Parent/Guardian Name	
Mailing Address		
4-H Trip/Event Reason for Request	Amount Paid	Amount Requested

Attach a copy of your receipt or canceled check as proof of payment.

Return this completed form to the Treasurer of the Greene County 4-H Leaders Council which meets the 3<sup>rd</sup> Thursday of the month at the University of Missouri Extension Office or by mailing it to:

4-H University of Missouri Extension  
833 N. Boonville Ave.  
Springfield, MO 65802.

Please note – Your reimbursement request must be completed within 60 days of your participation in the 4-H trip and or event in order to be considered. Reimbursements requested past this time frame will not be accepted.

#### Approval

Date Received	Date Approved
Signature of Greene County 4-H Leaders Council Treasurer	
Date of Reimbursement	Check Number
Signature of Greene County 4-H Foundation Treasurer	