



# Crook County 4-H Request for Funds

Date of Request \_\_\_/\_\_\_/\_\_\_\_\_

Name of requestor \_\_\_\_\_ Requested dollar amount  
\$ \_\_\_\_\_ to be used for \_\_\_\_\_ (registration or  
meals or mileage or ?) What is the event, the date of event and what are your goals and  
projected educational outcomes? How will Crook County and you benefit from this event?  
How will you share what you learn?

\_\_\_\_\_  
\_\_\_\_\_

What are your plans to fund a portion of this event?

Expenses for Event \$ \_\_\_\_\_ Other Funds received \$ \_\_\_\_\_  
\$ \_\_\_\_\_ \$ \_\_\_\_\_ \$ \_\_\_\_\_  
Total Expenses \$ \_\_\_\_\_ Total funding \$ \_\_\_\_\_  
(includes scholarships, personal contributions, personal fundraising, club contributions, etc.)

Have you received money from Crook County 4-H in the past? \_\_\_\_\_  
When/for what event?

\_\_\_\_\_  
What 4-H community service events have you participated in?

What 4-H fundraising events have your participated in?

\_\_\_\_\_

If receipts are required, you agree to turn in receipts to Crook County 4-H within a week after you return from the event. You also agree to present a report to your club and/or 4-H Council at the next regular meeting after the event has taken place.

Requestor's Signature \_\_\_\_\_ Date \_\_\_\_\_

Parent's Signature \_\_\_\_\_ Date \_\_\_\_\_

4-H Educator Signature \_\_\_\_\_

Date approved by 4-H Educator \_\_\_\_\_ Amount of funds approved \$ \_\_\_\_\_