# GONZALES COUNTY 4-H COUNCIL

1709 E. Sarah DeWitt Drive Gonzales, TX 78629

**4-H PAYMENT REQUEST FORM**

|  |
| --- |
| Date: |
| Person Submitting Request: |
| Name of Event: |
| Date of Event: |
| Contact Phone Number: |
| Amount Payable: |

|  |
| --- |
| Make check payable to: |
| Payee’s address: |
| Payee’s City/State/Zip: |

Attach copies of receipts within 30 days of event.

Signature of Parent/Guardian Requesting Payment or Reimbursement Date

Signature of County Council Treasurer Date

Signature of Adult Leader Treasurer Date

Revised 9.21.17