

San Carlos Eaton Hills 4-H Club
Expense Authorization and Reimbursement Form

Date of Request: ___ / ___ / ___

Details of Request

What was purchased and what was it purchased for? Please attach receipt(s). Submit this form and the receipts to the club treasurer.

Amount to be reimbursed: \$ _____

Request/Purchase Authorized by: _____

Make check payable to (name and address): _____

What is your email address? The club treasurer may need to contact you about this request.

Internal Use

Reimbursement date: ___ / ___ / ___

Account: farm / general

Check number: _____