HIGHLANDS COUNTY 4-H FOUNDATION
4509 GEORGE BLVD., SEBRING, FL 33875
Tel # 863-402-6540 Fax # 863-402-6544

4-H

4-H Funds Request Form

Form must be submitted to Extension Office **prior** to upcoming county association meeting. Keep in mind meetings take place once every two months; this form will need to be submitted far enough in advance to be reviewed in a timely fashion.

Date:_____ **4-H Club or Group:**_____

Organizational Leader Requesting Funds: _____

Phone Number: _____

Email: _____

Total Amount Requested: _____

Item or Activity: _____

Describe the Nature of Request

Please explain **in detail** below or on an additional paper what the requested funds will be used for, when the funds are needed, and who will benefit from this request.

_____

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_____

_____ _____
Club Leader Date

_____ _____
4-H Agent or CED Date
☐ Reviewed and Supported by 4-H Extension Faculty

_____ _____
4-H Advisory Chairman Date
☐ Reviewed and Supported by 4-H County Association

_____ _____
4-H Foundation President Date
☐ Approved ☐ Denied

This form must be submitted along with a Funds Requests Voucher to the Highlands County Extension Office.
Please allow up to 3 weeks for funds to be processed.

Updated 5/22/12 LMH