

**DOOR COUNTY 4-H LEADERS ASSOCIATION**

**REIMBURSEMENT REQUEST**

**WHO IS SUBMITTING THIS REQUEST:**

Name: \_\_\_\_\_

Club (if appropriate): \_\_\_\_\_

Number to call with questions: \_\_\_\_\_



**WHO SHOULD CHECK BE MADE OUT AND SENT TO:**

Individual Name or Club/Group Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City, State, ZIP: \_\_\_\_\_



**COMMENTS OR SPECIAL INSTRUCTIONS:**

DATE OF PURCHASE	DESCRIPTION AND REASON FOR PURCHASE (IF EVENT BASED, PLEASE LIST)	RECEIPT ATTACHED*	INVOICE ATTACHED*	TOTAL
*IF REQUEST IS FOR MILEAGE, LIST BEGINNING AND ENDING MILEAGE AND TOTAL MILES.			TOTAL REQUEST	

Signature of Submitter: \_\_\_\_\_ Date: \_\_\_\_\_

Submit request form with receipts and/or invoices to [candis.dart@wisc.edu](mailto:candis.dart@wisc.edu) or mail to:

Door County 4-H Leaders Association  
 Extension Office  
 421 Nebraska Street  
 Sturgeon Bay, WI 54235

**\*\*Note: receipts without this form will not be reimbursed\*\***

You may also bring this form to a Leaders Association meeting and deliver directly to the Leaders Association Treasurer. Checks will be made and signed the 1<sup>st</sup> Tuesday of every month. Forms and supporting documents can be submitted at least 3 days prior to the 1<sup>st</sup> Tuesday of the month to be paid that month. If submitted after, or at the Leaders Association meeting, we will try to accommodate requests, but reimbursement is guaranteed by the following meeting.

FOR EXECUTIVE COMMITTEE USE ONLY		
DATE APPROVED:	CHECK NUMBER:	INITIALS OF WHO SIGNED CHECK:
CHECK PICKED UP IN PERSON BY:	CHECK MAILED (DATE AND INITIALS):	COMMENTS: