

FOR TREASURER ONLY:

Posted in Journal \_\_\_\_\_ Check Number: \_\_\_\_\_ Date Paid: \_\_\_\_\_ By: \_\_\_\_\_

**Reimbursement/Refund form  
SONOMA COUNTY 4-H COUNTY CLUB COUNCIL**

\_\_\_\_\_ **General Fund** \_\_\_\_\_ **Please specify account or project**

\_\_\_\_\_ **Special Accounts** \_\_\_\_\_ **Please specify account or project**

I, \_\_\_\_\_ request reimbursement/refund from Sonoma  
County 4-H County Club Council for the following purchase. I am attaching  
receipts to document my purchase. My reimbursement/refund is for the

following: Amount: \_\_\_\_\_ Description: \_\_\_\_\_

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**Total Requested:** \_\_\_\_\_ (receipts or documentation attached)

Signature of Requestor: \_\_\_\_\_

Date submitted: \_\_\_\_\_

Check Payable to: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

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Phone number: \_\_\_\_\_

PLEASE ATTACH RECEIPTS