



## Santa Cruz County 4-H Youth Development Program

### Volunteer Fingerprint Reimbursement Form

Volunteers may request reimbursement from the Santa Cruz County 4-H Leaders Council for their Livescan Fingerprinting expenses after completing one year of service in good standing to the Santa Cruz County 4-H Youth Development Program. To receive reimbursement, complete the following steps:

1. Please complete the *Volunteer Section* of this form.
2. Attach a copy of the *Request for Livescan Service Application Submission Form*.
3. Have your Community Club Leader complete the *Community Club Leader Section*.
4. Mail to UCCE Santa Cruz County/4-H Program Office: 1432 Freedom Blvd.  
Watsonville, CA 95076

#### Volunteer Section:

Name: _____	
Address: _____	
_____	
Phone: _____	Club: _____
Date: _____	Reimbursement Amount: _____

#### Community Club Leader Section:

_____	Date volunteer began date of service _____
_____ <i>Community Club Leader Signature</i>	

#### 4-H Youth Development Office Section:

_____	Date reimbursement request received
_____	Date completed application including confidential page completed
_____	Date orientation completed
_____	Date reimbursement approved
_____ <i>4-H YDP signature</i>	
_____	Date request sent to Leaders Council Treasurer for payment
<i>(retain a copy for our records)</i>	