



4-H FUND RAISER ACTIVITY
RECEIPT FORM

Name of Club/Group _____

Today's Date: _____

Date of Fund Raiser: _____

Type of Fund Raiser _____
(Yard sale, car wash, candles, wreaths, cookie dough, horse show, etc.)

Amount of Funds Earned: _____

Educational Purpose of Activity: (Explain how funds will be used)

****Any money earned must be collected and accounted for by two adults and the club treasurer. All three must sign below stating that they have accounted for the said money above and have deposited the said money in a bank or the Osceola County 4-H Association.**

Leader/4-H Representative Signature: _____ Date: _____

Co-Leader/Adult Volunteer Signature: _____ Date: _____

Club/Committee Treasurer Signature: _____ Date: _____