



4-H Club Individual Reimbursement Form

_____ has purchased items or services out of their own personal funds, for use by our 4-H Club/Organization and is approved to receive reimbursement in the amount indicated below. (Original itemized receipts must be attached to this voucher)

Name(s) -Requires two non-related signatures	4-H Club/Organization	Amount	Date Verified

I hereby certify that the expenses listed above were incurred by me and are necessary and appropriate expenditures of the University. By my signature, I acknowledge that the goods purchased become the property of 4-H and Virginia Tech.

Signature

Date

Address where payment should be mailed: _____
