

**UC 4-H Financial Form**  
**Advance Payment/Funding**

Please use this form to request for advance payment/funding on behalf of the 4-H program in Humboldt and/or Del Norte Counties. Pre-approval must be obtained from 4-H Staff prior to completing the form.

Payee:	<b>For Treasurer Use Only</b>
Address:	Check No:
Date Requested:	Date of Issue:
Requested Amount:	Amount of Check:
Pre-Approval for this Advance Payment/Funding has been received by _____ (4-H Staff) on _____ (date)	

I \_\_\_\_\_ (payee name), declare that I will use 4-H funds  
 on behalf of the \_\_\_\_\_ (4-H Unit/Activity/Event) as follows...

Description of the supplies or services to be purchased:

Purpose for which the supplies or services will be purchased:

I understand that I MUST provide ALL receipts and ALL remaining funds to the UC Cooperative Extension Office within two (2) weeks of purchase(s).

\_\_\_\_\_  
 Signature of Payee Date

\_\_\_\_\_  
 Signature of 4-H Staff Date