4-H CAMP EXPENDITURES - FOR REIMBURSEMENT

COMPLETE IN DUPLICATE AND SEND ONE COPY WITH RECEIPTS

Camp _____

Mr. Terry L. Patterson
Extension 4-H Specialist
NCSU Box 7606
Raleigh, NC 27695-7606

Date _____

Enclosed are _____ paid receipts totaling $_____ for which reimbursement is requested to _____ 4-H Camp Fund.

THE RECEIPTS ARE LISTED BELOW:

CHECK NO.	TO WHOM PAID	ITEM(S) PURCHASED	PROJECT	OBJECT	AMOUNT
(TOTAL)					

LIST CHECKS IN CONSECUTIVE NUMERICAL ORDER
DO NOT LIST MORE THAN SIX (6) DIFFERENT <u>OBJECT CODES</u> ON THIS SHEET