



# Texas 4-H Youth Development Foundation

P.O. Box 11020

College Station, Texas 77842-1020

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## PAYMENT REQUEST FORM

Revised: July 2022

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Date:

Person Submitting Request:

Contact Phone Number:

Type of Request (check one):

4-H Faculty

County Extension Agent

Department (4-H Faculty Only):

County (CEA Only):

Amount Payable:

Memo (to appear on check stub):

Make check payable to:

Payee's address:

Payee's city/state/zip:

### **SPECIAL INSTRUCTIONS**

If not mailing direct, return to:

Event Name/Expense Detail:

Explanation of Expenditure\*:

(For internal use only)

*\*Attach copies of bills, invoices, receipts, and/or vouchers. (If copies are not available, a signed affidavit of cost and justification will be required).*

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Signature of Department/County Manager, verifies adequate and proper use of funds.

Date

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Signature of Foundation CEO, verifies compliance with contracts/agreements.

Date