



Texas 4-H Youth Development Foundation

P.O. Box 11020
College Station, Texas 77842-1020

PAYMENT REQUEST FORM

Revised: August 2022

Date:

Person Submitting Request:

Contact Phone Number:

Contact Email:

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).*

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

Date

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

Date