



MARICOPA COUNTY

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4-H Club/Committee Fund-raising Approval Form

Club Name:			
Leader's Name:			
Phone:	E-Mail:		
Describe how the funds will be	e used:		
Describe the fund-raising effor applicable), cost, etc.:			
Date fund-raising activity begin		G	vity ends:
Where will the fund-raising ac	tivity take place?		
Amount of money to be raised			
Amount of money to be raised	ι. ψ		
Club Leader/Committee Presi	dent Signature:		
Date Submitted:			
Please note: Approval by the assumes any responsibility or			e of products sold, nor
Please Mail to: Maricopa Coto: cwerkhoven@arizona.ed		-	
FOR OFFICE USE			
4-H Staff Member Signature:		Approved:	Not Approved:
Notes to Leader:			
Scan & Email to Leader – Date F	Returned:	By:	

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