Application for Jaeger Endowment Funds

Note: Only 4-H Leaders and/or the 4-H Agent/Program Coordinator can apply for funds.

Date						
NamePhone						
Mailing address						
		treet/Box	City	State	Zip	
Club Name (If applie	cable)					
Type of Event				Date of Event		
		Individual Club				
How will you or the	participants benefi	t from this event or the	se funds?			
Estimated Expenses	5:					Amount
					Γotal	
I understand receip	ts are required to b	e submitted within 2 we	eeks following the ever	nt.		
Leader/Applicant's Signature						 te
Leader/Applicant 3	Signature				Da	te
4-H Agent/Program Coordinator Signature						ate
Please subm	nit application two v	veeks prior to event to:	Gilliam County 4-H Ass	sociation, PO Box 707,	Condon	, OR 97823
For Office Use Only	<i>r</i> :					
Approved	Rejected					
Jaeger Fund Committee's Approval Date Jaeger Fund Committee's App						Date
	Ι					
Date	Ck#		Payee			Amount
					+	
				Total S	pent	