

## **4-H Funding Proposal**



Name of Group:	
Type of 4-H Group:	
Mailing address for Unit:	
Phone:	Email:
Describe what type of fundraising activity	your 4-H unit plans to undertake:
What is the anticipated start date?	
Once funds have been collected, how will	they be used to support the goals and activities of your 4-H
SIGNATURES REQUIRED:	
_	Date:
	Date:
	IIS PROPOSAL, THE GROUP NAMED IS AUTHORIZED TO PROCEED WITH S AUTHORIZED TO USE THE 4-H NAME AND EMBLEM IN CONNECTION
County Extension Agent:	
County:	Date:

\* A copy of this proposal must be kept on file by the club or 4-H unit leader and the county Extension office.