



# Check Disbursement Form

\_\_\_\_\_ *4-H Club Name*

Date: \_\_\_\_\_

Pay to: \_\_\_\_\_  
*Copy of bill or statement must be attached*

| Items Purchased: | Project: | Amount: |
|------------------|----------|---------|
|------------------|----------|---------|

Approved: \_\_\_\_\_  
*Signature of President or Secretary*

Check Number: \_\_\_\_\_ Check Date: \_\_\_\_\_

By: \_\_\_\_\_  
*Treasurer or other signatory who is making the payment*