



**Washington County
4-H Leaders Association
Income/Expense Form**

**DUE BY
20TH OF
THE
MONTH**

Budget Account No. 4544 Name of Account Horse and Pony Project

Please check (✓) _____ Income _____ Expenses

Amount Paid: _____ **OR**

Amount Deposited: _____

Submitted by: _____ Phone: _____
Name

Describe income or expense:

- | | |
|--|---|
| <input type="checkbox"/> Performance Shows _____ | <input type="checkbox"/> Fair _____ |
| <input type="checkbox"/> Speed Shows _____ | <input type="checkbox"/> State _____ |
| <input type="checkbox"/> Food Stand _____ | <input type="checkbox"/> Educational _____ |
| <input type="checkbox"/> Tack Sale _____ | <input type="checkbox"/> Scholarships _____ |
| <input type="checkbox"/> Pre-Fair _____ | <input type="checkbox"/> Awards _____ |
| | <input type="checkbox"/> Other _____ |

Please check (✓) Check should be mailed by Treasurer
 Check to be returned to 4-H Office

If bill, please attach receipts and include who payment is payable to.

Name

Address

Date Submitted: _____

Received in Office by: _____



**Washington County
4-H Leaders Association
Income/Expense Form**

**DUE BY
20TH OF
THE
MONTH**

Budget Account No. 4544 Name of Account Horse and Pony Project

Please check (✓) _____ Income _____ Expenses

Amount Paid: _____ **OR**

Amount Deposited: _____

Submitted by: _____ Phone: _____
Name

Describe income or expense:

- | | |
|--|---|
| <input type="checkbox"/> Performance Shows _____ | <input type="checkbox"/> Fair _____ |
| <input type="checkbox"/> Speed Shows _____ | <input type="checkbox"/> State _____ |
| <input type="checkbox"/> Food Stand _____ | <input type="checkbox"/> Educational _____ |
| <input type="checkbox"/> Tack Sale _____ | <input type="checkbox"/> Scholarships _____ |
| <input type="checkbox"/> Pre-Fair _____ | <input type="checkbox"/> Awards _____ |
| | <input type="checkbox"/> Other _____ |

Please check (✓) Check should be mailed by Treasurer
 Check to be returned to 4-H Office

If bill, please attach receipts and include who payment is payable to.

Name

Address

Date Submitted: _____

Received in Office by: _____