

4-H Educational Receipt

	eipt	Softhwest Mich
The 4-H member Name:		HI Livestock Co
4-H member animal project:		
4-H member's Club:		
4-H members phone number:		
Educational Program Name:		
Date of Program:		
I certify that I attended the educational program listed	above.	
4-H Member	Date	
Educational Program Facilitator/Coordinator's signatu	ire Date	
4-H Educational Rece	eipt	
		Softhwest Mic
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Educational Program Facilitator/Coordinator's signature