4-H MATERIAL ORDER FORM

CLUB NAME _____

LEADER'S NAME _____

DAYTIME PHONE # _____

Office Use Only

Date Received _____

Filled _____

Contacted _____

See the current Kootenai/Shoshone 4-H Project Requirement Handbook for available items

Item Name – Be as specific as possible.	**NUMBER ORDERED**	**BACK ORDERED**