

TROOP 131

Mulch Refund Request Form

Paid by Check # _____

Dated _____

Submitted by the fundraiser point person only

Date: _____

Total Amount: \$ _____

Pay to the order of:

Address (if check needs to be mailed):

Reason for refund request:

Original sales / order form must be attached:

Submitted By: _____

Date: _____

Received By: _____

Date: _____

Treasurer

Approval: _____

Date: _____

**Committee Chair

**Any requests over \$300 must be approved by the Committee Chair