



**Shooting Sports
Ammunition Purchase Request Authorization**
12/2009

**California 4-H Shooting Sports
Ammunition Purchase Request Authorization**

(This applies to modern cartridge firearms. It does not include ammunition for air guns or muzzle loading firearms.)

Date: _____

Name of 4-H Club or Council: _____

Name & phone number of 4-H volunteer making request: _____

Location where will ammunition be stored: _____

Quantity to be purchased	Gauge/Caliber	Vendor	Approximate Cost

I am a trained 4-H Shooting Sports Adult Volunteer in good standing. I have a copy and have reviewed the applicable policies on the use and storage of ammunition for the California 4-H Shooting Sports program.

4-H Adult Volunteer Signature: _____ Date: _____

4-H Staff Approval Signature: _____ Date: _____

County Director Approval Signature: _____ Date: _____

Name of person(s) designated by County Director to make purchase: _____