POSTAL ENTRY REPORT

**Year: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ COUNTY: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

RETURN ADDRESS: *As soon as entries are removed, State Fair will put this address on the box for return.*

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | | | **For use by State 4-H Fair Office** | | | | | |
| **BOX INVENTORY** **NUMBER**:  *(Insert Sample)* | |  | | | |
|  | | |
|  | | | *(Circle One)* | |  | | | |
| **CHECK** | **CASH** | | **STAMPS** | | |
|  | | | **Check Number:** | | **Amount Received, or Value of Stamps:** | | | |
|  | | |  | |  | | | |
| **EXHIBITOR NAME** | | **DESCRIPTION OF EXHIBIT** | | | | | **CLAIM NO.** |
| 1 |  |  | | | | |  |
| 2 |  |  | | | | |  |
| 3 |  |  | | | | |  |
| 4 |  |  | | | | |  |
| 5 |  |  | | | | |  |
| 6 |  |  | | | | |  |
| 7 |  |  | | | | |  |
| 8 |  |  | | | | |  |
| 9 |  |  | | | | |  |
| 10 |  |  | | | | |  |
| 11 |  |  | | | | |  |
| 12 |  |  | | | | |  |
| 13 |  |  | | | | |  |
| 14 |  |  | | | | |  |
| 15 |  |  | | | | |  |
|  | | *Continued on back:* | | | | | *(Circle One)* YES NO |

|  |  |  |  |
| --- | --- | --- | --- |
| PAGE 2 | |  |  |
| **EXHIBITOR NAME** | | **DESCRIPTION OF EXHIBIT** | **CLAIM NO.** |
| 16 |  |  |  |
| 17 |  |  |  |
| 18 |  |  |  |
| 19 |  |  |  |
| 20 |  |  |  |
| 21 |  |  |  |
| 22 |  |  |  |
| 23 |  |  |  |
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| 25 |  |  |  |
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| 28 |  |  |  |
| 29 |  |  |  |
| 30 |  |  |  |
| 31 |  |  |  |
| 32 |  |  |  |
| 33 |  |  |  |

**For State 4-H Fair Office Use:**

|  |  |
| --- | --- |
| **COUNTY**  **or**  **LAST NAME** |  |
| **BOX INVENTORY NUMBER:** |  |