FORM 3 (Due Oct 31**)**
YELLOWSTONE COUNTY 4-H CLUB
LEADER/MEMBER COMPLETION REPORT
YEAR 20____~ 20_____
CLUB____________________________________

Name of Individual Checking Record Books ______________________________

Date pins/seals needed:(two weeks minimium)__________

List all members, cloverbuds, teen leaders and leaders that were enrolled in your club. Record Books are required (with the exception of Cloverbuds) to consider the year complete and receive a year pin. See completion guidelines for information.

Member/Clovederbud Full Name (First, Last)	# Years in 4-H (Include the Current Year)	Did Member complete the Year? Yes or No (Must have a completed record book that has been checked by a club representative.)	Gold Seal Record Book? Yes or No

Junior/Teen Leader **(Marked the "Volunteer Title" column on their enrollment form or signed up and completed their plan in the Teen Leader Project)**	**# Years in 4-H (Include the Current Year)**	**Did Member Complete Junior/Teen Leader Responsibilities?** **Yes or No**
Leaders' Name	**# Leader Years (Include the Current Year)**	**Did Leader Complete Year?** **Yes or No**