Minnesota State Fair 4-H Appeal (Complaint) Form

Appeal/Complaint:

Reasons for Appeal/Complaint:

List Circumstances Relating to the Appeal/Complaint:

Action Requested:

Date of the Appeal/Complaint Incident:

Signatures of those filing the appeal/complaint:

<table>
<thead>
<tr>
<th>Signature</th>
<th>Printed Name</th>
<th>Phone # during the State Fair (include area code)</th>
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This appeal form must be accompanied by $100.00. Only cash or a money order will be accepted. This money will be returned if the decision is ruled in favor of the person(s) filing the appeal. If the decision is ruled against the person(s) filing the appeal, the money will be donated to the Minnesota 4-H Foundation.

Note: With some appeals, such as livestock appeals, testing (drug, urine, blood, ect.) may be necessary. In such cases, the cost of testing will initially be born by the person(s) signing the appeal. This money will be refunded if the decision is ruled in favor of the person(s) filing the appeal.
FOR COMMITTEE USE ONLY:

Date form and $100 was received: ____________________________________________

Person receiving form: ________________________________________________

Date of appeal hearing: ________________________________________________

Committee decision: ____________________________________________________

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I authorize $________ in testing expenses to further investigate the above complaint.

Signature: _____________________________________________________________ Date: ___________