

**4-H/Tropicana Public Speaking Program  
Product Reimbursement Form  
(for Tropicana juice products only)  
2010 - 2011 School Year**

<i>COUNTY INFORMATION</i>			
<b>County</b>			
Contact Name			
Street Address			
P.O. Box			
City		Zip	
Phone			
Fax			
E-Mail			
Product Purchased	Quantity	Price	Total
		Grand Total To Be Reimbursed	

**RECEIPTS ATTACHED**

**Please mail or fax to:**

**Tracy Szelwach, Executive Assistant  
Tropicana Products, Inc.  
P.O. Box 338  
Bradenton, FL 34206  
(941) 749-3966 Fax**