

HUNTERS SHARING THE HARVEST

PROCESSOR REIMBURSEMENT FORM

Date: _____ County: _____

Processing Business Name: _____

Make check payable to: _____

Address: _____ City: _____ State: _____ ZIP: _____

Phone: _____ Email: _____

| # of Deer | Donated From | \$ Rate Per Deer | Total \$ |
|-----------|--|---------------------|----------|
| | Private Hunters - Standard tags | | |
| | Ag Tag (formerly Red Tag) | | |
| | DMAP Permits/Tags | | |
| | USDA Municipality Park Cull | | |
| | State Game Warden (crop damage/depredation permit) | | |
| | State Game Warden (mistake kill, confiscated, vehicle collision) | | |
| | | | |
| | | Grand Total: | |



Total Pounds of Venison Donated (MUST BE COMPLETED): _____

You **MUST INCLUDE** your **Venison Pick-up Record** and top copy of all **Donor Receipts** with this form.

Mail completed form **along with** your **Venison Pick-up Record** and top copy of all **Donor Receipts** to:

Hunters Sharing the Harvest
218 Vernon Rd.
Greenville, PA 16125
randy@sharedeer.org

Submission Deadline: April 30