## TREASURER

## ILLINOIS 4 - H CLUBS

Year

## Club Name

Treasurer
Treasurer's Address
Phone

Illinois 4-H Club Annual Financial Statement
In order to re-enroll, a completed financial statement and fiscal review must be submitted to the county Extension Office and approved by the County Extension Director.
**PLEASE COMPLETE ALL SECTIONS**

This financial statement is for the period September 1, $\qquad$ through August 31,
4-H Club Name $\qquad$
County $\qquad$ Employer Identification Number (EIN) $\qquad$
Checking account balance at $\qquad$
(Name and Location of Financial Institution)
Checking account number $\qquad$

1. Beginning Account Balance as of September 1, $\qquad$ \$ $\qquad$
2. Income Source:
A. Donations
Income:
\$ $\qquad$
\$ $\qquad$
\$ $\qquad$
B. Fundraisers
C. Other / miscellaneous - itemize*
D. Total Income (add line A + B + C)

3. Beginning Account Balance plus Total Income (add line $1+2 \mathrm{D}$ )
\$ $\qquad$
4. Expense Categories:
A. Meeting expenses / speaker fees

Expenses:
B. Food / refreshments
\$ $\qquad$
C. Project manuals / workshops
D. 4-H Program fees
E. Trips
\$ $\qquad$
F. Awards / scholarships
\$ $\qquad$
\$ $\qquad$
G. Community service activities
\$ $\qquad$
H. Rental fees**
\$ $\qquad$
\$ $\qquad$
\$ $\qquad$
I. Other / miscellaneous*
J. Total Expenses (add lines A-I)
\$ $\qquad$
\$

Itemization of Miscellaneous expenses (Required):
5. Balance as of August 31, $\qquad$ (subtract Total Expenses line 4(J) from line 3) \$ $\qquad$
6. Outstanding deposits
(Subtract total of deposit amounts that have not appeared on bank statements)
\$ $\qquad$
7. Outstanding checks
(Add total of check amounts that have not appeared on bank statements)
\$ $\qquad$
8. Adjusted Balance (should agree with end of year bank statement)
\$ $\qquad$
**If a contract or agreement is required, the Extension Business Office will obtain the signature for the document on behalf of the 4-H club.

In order to re-enroll, a completed financial statement and fiscal review must be submitted to the county Extension Office and approved by the County Extension Director.

Savings account balance at $\qquad$
(Name and Location of Financial Institution)
Savings account number $\qquad$

1. Beginning Account Balance as of September 1 $\qquad$ \$ $\qquad$
2. Income Source:
A. Donations
B. Fundraisers
C. Other / miscellaneous - itemize*
D. Total Income (add line A+B + C)

## Income:

\$
\$ $\qquad$
$\qquad$
\$
\$ $\qquad$
3. Beginning Account Balance plus Total Income (add line $1+2 \mathrm{D}$ )
\$ $\qquad$
4. Expense Categories:

## Expenses:

A. Transfer to checking account
\$ $\qquad$
B. Other: $\qquad$ \$ $\qquad$
C. Other: $\qquad$ \$ $\qquad$
D. Other: $\qquad$ \$ $\qquad$
E. Total Expenses (add lines A - D)
\$ $\qquad$
5. Balance as of August 31, $\qquad$ (subtract Total Expenses line 4E from line 3)
\$
This certifies the above information is a correct statement of financial activity for this 4-H Club.
(4-H Club Treasurer's signature) (Date)

Fiscal Review: ( REQUIRED: Fiscal Review Committee should include a combination of youth and adults without signatory rights on the account.)

We have examined the financial records including bank statements, checks written, copies of bills paid, itemized deposit slips, and receipts of this 4-H Club and find them in good order.

| (Fiscal Review Committee signature) | (Date) |
| :--- | :---: |
| (Fiscal Review Committee signature) | (Date) |
| (Fiscal Review Committee signature) |  | Illinois 4-H Club Annual Financial Statement—Checking Account

For Club to be re-enrolled, a completed annual financial statement and fiscal review must be submitted to the County Extension Office before September 30th of each new Extension year and approved by the County Extension Director.
**For Clubs that only have one account type complete the appropriate form—ALL SECTIONS MUST BE COMPLETED**
This financial statement is for the period September 1, $\qquad$ through August 31, $\qquad$
4-H Club Name $\qquad$ County.

Employer Identification Number $\qquad$ Checking account number

Name \& Location of Financial Institution

1. Beginning Account Balance as of September 1, $\qquad$ \$ $\qquad$
2. Income Source:
A. Donations
B. Fundraisers
C. Other/miscellaneous - itemizations*
D. Total Income (add line A + B + C)
Income:
\$ $\qquad$
\$ $\qquad$
$\$$ $\qquad$
*Itemization of Miscellaneous Income

Required if Income listed in Other
3. Beginning Account Balance plus Total Income (add line $1+2 \mathrm{D}$ )
$\$$ $\qquad$
4. Expense Categories
A. Meeting expenses/speaker fees

Expenses:
\$ $\qquad$
$\$$
B. Food/refreshments
C. Project manuals/workshops
$\$$ $\qquad$
D. 4-H Program Fees
E. Trips
F. Awards/Scholarships
G. Community service activities
H. Rental Fees**
I. Other/Miscellaneous* - itemizations
J. Total Expenses (add lines A-I)
\$ $\qquad$
$\$$ $\qquad$
$\$$ $\qquad$
$\$$
$\qquad$
$\$$ $\qquad$
\$ $\qquad$
\$ $\qquad$

Required if Expense listed in Other

5. Balance as of August 31, 20___ (subtract expense line 4J from line 3)
\$ $\qquad$
6. Outstanding Deposits (subtract total of deposit amounts that have not appeared on bank statements)
\$ $\qquad$
7. Outstanding Checks (Add total of check amounts that have not appeared on bank statements)
\$ $\qquad$
8. Adjusted Balance (should agree with the end-of-year bank statement)
$\$$ $\qquad$
This certifies the above information is a correct statement of financial activity for this 4-H Club.

FISCAL REVIEW (REQUIRED: Committee should include a combination of youth and adults without signatory rights on the account.) We have examined the financial records including bank statements, checks written, copies of bills paid, itemized deposit slips, and receipts on this 4-H Club and find them in good order.

Illinois 4-H Club Annual Financial Statement—Savings Account
For a Club to be re-enrolled, a completed annual financial statement and fiscal review must be submitted to the County Extension Office before September 30th of each new Extension year and approved by the County Extension Director.
**For Clubs that only have one account type complete the appropriate form - ALL SECTIONS MUST BE COMPLETED**
This financial statement is for the period September 1, $\qquad$ through August 31,

4-H Club Name $\qquad$ County

Employer Identification Number $\qquad$ Savings account number $\qquad$
Name \& Location of Financial Institution

1. Beginning Account Balance as of September 1, $\qquad$ \$ $\qquad$
2. Income Source:
A. Donations

Income:
*Itemization of Miscellaneous Income
B. Fundraisers
C. Other/miscellaneous-itemizations*
D. Total Income (add line $A+B+C$ )
\$ $\qquad$
$\$$
$\$$ $\qquad$


Required if Income listed in Other
3. Beginning Account Balance plus Total Income (add line $1+2 \mathrm{D}$ )
\$ $\qquad$
3. Expense Categories
A. Transfer to checking account

Expenses:
\$ $\qquad$
*Itemization of Miscellaneous Expenses
B. Other: $\qquad$ $\$$ $\qquad$
C. Other: $\qquad$
$\qquad$
D. Other: $\qquad$ $\$$ $\qquad$
E. Total Expenses (add lines A-D) $\qquad$


Required if Expense listed in Other
5. Balance as of August 31, 2023 (subtract expense line 4E from line 3)
\$ $\qquad$
This certifies the above information is a correct statement of financial activity for this 4-H Club.

FISCAL REVIEW (REQUIRED: Committee should include a combination of youth and adults without signatory rights on the account.)

We have examined the financial records including bank statements, checks written, copies of bills paid, itemized deposit slips, and receipts on this 4-H Club and find them in good order.

Record of Club Finances
Record all charges or credits that affect your account

| $\begin{array}{\|l\|l\|} \hline \text { Check } \\ \text { Number } \end{array}$ | Date | Description of Transaction | Payment/Debit <br> (-) | $\checkmark$ | Deposit/Credit <br> $(+)$ | Balance |
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*Include name of person receiving check and the reason for the payment OR for deposits, list the source of the deposits (person and reason)

Record of Club Finances
Record all charges or credits that affect your account

| $\begin{array}{\|l\|l\|} \hline \text { Check } \\ \text { Number } \end{array}$ | Date | Desscription of Transaction | Payment/Debit <br> $(-)$ | $\checkmark$ | Deposit/Credit <br> $(+)$ | Balance |
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*Include name of person receiving check and the reason for the payment OR for deposits, list the source of the deposits (person and reason)

Record of Club Finances
Record all charges or credits that affect your account

| $\begin{array}{\|l\|l\|} \hline \text { Check } \\ \text { Number } \end{array}$ | Date | Description of Transaction | Payment/Debit <br> $(-)$ | $\checkmark$ | Deposit/Credit <br> $(+)$ | Balance |
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*Include name of person receiving check and the reason for the payment OR for deposits, list the source of the deposits (person and reason)

## Illinois 4-H Club Inventory

List all items that belong to the 4-H club, whether purchased with club money or received as gifts. Place an asterisk (*) by items that were purchased or received as gifts this year. Include the name of the person or business that provided the gift. All club donations should be acknowledged in writing to the donor. A copy of the acknowledgement should be kept in the treasurer's records.

| Quantity |  |
| :---: | :--- |
| 1 | Gavel, donated by Mary Jones Family |
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## 4-H PLEDGE

I pledge my $\boldsymbol{H E A D}$ to clearer thinking;
my HEART to greater loyalty;
my HANDS to larger service; and my HEALTH to better living for my club, my community, my country, and my world.

## 4-H MOTTO

To Make The Best Better


Illinois Extension

