4-H CLUB/EXTENSION AFFILIATED GROUP ANNUAL FINANCIAL REPORT

to be completed by the Financial Review Committee

Name of club or affiliated group	(include county/district name) _		
Financial Review Date			
Review of the financial records	of at least two adult leaders and of your club or affiliated group. <u>C</u> its or have familial or financial re	ommittee members should no	
Check or Savings Account Number	Bank Name and type of account Savings, checking, CD	Beginning Balance October 1	Ending Balance September 30
	ployer identification number or I		
The bank records are in the pos	session of:		
Persons authorized to sign on th	e club or affiliated group financia	al account(s)	
List any expenses or income tha	t looks unusual:		
This certifies that the financial rethey are (Please check one as it	eview committee has reviewed thapplies):	ne record keeping and financia	Il balances and finds that
Are in Order (Complete	back side of form and return to	our local Extension Office)	
	nplementation of the recommen your local Extension Office for fu		
financial review if possible. Reco	and action (Further review and a ommendations should be include your local Extension Office of an	d on this form-use additional p	paper if needed. A written

(Please Complete Other Side)

The Club or Other Affiliated Financial Review Comi We have examined the treasury records of the club accurate.		
We have examined the treasury records of the clul	b or affiliated group and believe all expens	ses and incomes to be
accurate.		
Name (Please Print)	Signature	Date
l		
D		
3		
5		-
*By signing I verify that I am not a family member account and have adhered to all the guidelines esto		member.
EXTENS	ION OFFICE USE BELOW	
Date First Received In Office	_ Reviewed/Received By	
1. All submitted information appears to	be in order. No follow up information o	or actions are needed.
2. Corrections or additional information	n is needed as indicated:	-

This document was adapted from a form developed by the Meadowlark Extension District.