

# TREASURER

ILLINOIS 4 – H CLUBS

RECORD BOOK

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\*\*

unty _		Employer Ide	entification Numbe	er (EIN)	
ecking	accou	nt balance at			
			cation of Financial Inst	•	
hecking	g accou	unt number			
1. I	Beginn	ing Account Balance as of September 1,	_	\$	
2. I	Income	e Source:	Income:	*Itemiz	zation of Miscellaneous Income
	A.	Donations	\$		
	B.	Fundraisers	\$		
	C.	Other / miscellaneous - itemize*	\$		
	D.	Total Income (add line $A + B + C$ )	\$	Requir —_	ed if Income listed in Other
3. I	Beginn	ing Account Balance plus Total Income (add	line 1 + 2D)	\$	<u> </u>
4. I	Expens	e Categories:	Expenses:		Itemization of Miscellaneous
	A.	Meeting expenses / speaker fees	\$		expenses (Required):
	B.	Food / refreshments	\$		
	C.	Project manuals / workshops	\$		
	D.	4-H Program fees	\$		
	E.	Trips	\$		
	F.	Awards / scholarships	\$		
	G.	Community service activities	\$		
	Н.	Rental fees**	\$		
	I.	Other / miscellaneous*	\$	_	
	J.	Total Expenses (add lines A-I)	\$		
5. I	Balance	e as of August 31, (subtract Total Exp	enses line 4(J) fron	n line 3)	\$
		nding deposits act total of deposit amounts that have not appe	ared on bank state	ments) \$	<u> </u>
7. (	Outstar	nding checks  otal of check amounts that have not appeared of			

<sup>\*\*</sup>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.



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Savings account balance at(Name and Loc	cation of Financial Institution)	
Savings account number		
1. Beginning Account Balance as of <b>Septem</b>	ber 1	\$
2. Income Source:	Income:	
A. Donations	\$	
B. Fundraisers	\$ \$	
C. Other / miscellaneous - itemize*	\$ \$	
D. Total Income (add line $A+B+C$ )	\$	
3. Beginning Account Balance plus Total Income	(add line $1 + 2D$ )	\$
4. Expense Categories:	<b>Expenses:</b>	
A. Transfer to checking account	\$	
B. Other:	\$	
C. Other:	\$	
D. Other:	\$	
E. Total Expenses (add lines A - D)	\$	
5. Balance as of <b>August 31</b> , (subtract Total	Expenses line 4E from li	ne 3) <u>\$</u>
This certifies the above information is a correct state	ement of financial activit	ty for this 4-H Club.
(4-H Club Treasurer's signature)		(Date)
(4-H Club Leader's signature)		(Date)
<b>Fiscal Review:</b> ( <b>REQUIRED:</b> Fiscal Review Committee shot the account.)	ould include a combination of y	outh and adults without signatory rights on
We have examined the financial records including bank deposit slips, and receipts of this 4-H Club and find the		en, copies of bills paid, itemized
(Fiscal Review Committee signature)		(Date)
(Fiscal Review Committee signature)		(Date)
(Fiscal Review Committee signature)		(Date)





### Record of Club Finances

Record all charges or credits that affect your account

Check Number	Date	Description of Transaction	Payment/Debit (-)	V	Deposit/Credit (+)	Balance

<sup>\*</sup>Include name of person receiving check and the reason for the payment OR for deposits, list the source of the deposits (person and reason)



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## 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	Item
1	Gavel, donated by Mary Jones Family



#### 4-H PLEDGE

I pledge my **HEAD** 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





Urbana-Champaign, Illinois

8/2022