





# 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.

Savings account balance at \_\_\_\_\_  
(Name and Location of Financial Institution)

Savings account number \_\_\_\_\_

1. Beginning Account Balance as of **September 1** \_\_\_\_\_ \$ \_\_\_\_\_
2. Income Source:
 

	<b>Income:</b>
A. Donations	\$ _____
B. Fundraisers	\$ _____
C. <b>Other / miscellaneous - itemize*</b>	\$ _____
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 **August 31**, \_\_\_\_\_ (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)

\_\_\_\_\_  
(4-H Club Leader'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) (Date)

