Use this copy or download a fillable PDF at go.illinois.edu/LMSresources

Give the completed book to your club leader after your last meeting of 23-24.

- If you have a CHECKING account complete page 5
- If you have a SAVINGS account complete page 7
- If you have BOTH checking and savings complete pages 3-4



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

ounty		Employer Id	dentification Number	(EIN)
heckin	ıg accou	nt balance at		
			Location of Financial Insti	•
Checki	ng acco	unt number		
1.	Beginn	ing Account Balance as of September 1,		\$
2.	Income	e Source:	Income:	*Itemization of Miscellaneous Income
	A.	Donations	\$	_
	B.	Fundraisers	\$	_
	C.	Other / miscellaneous - itemize*	\$	=
	D.	Total Income (add line $A + B + C$)	\$	Required if Income listed in Other —
3.	Beginn	ing Account Balance plus Total Income (ad	ld line 1 + 2D)	\$
4.	Expens	se Categories:	Expenses:	Itemization of Miscellaneou
	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	\$	_
	H.	Rental fees**	\$	_
	I.	Other / miscellaneous*	\$	=
	J.	Total Expenses (add lines A-I)	\$	
5.	Balanc	e as of August 31 , (subtract Total Ex	penses line 4(J) from	line 3) §
6.	(Subtra	nding deposits act total of deposit amounts that have not app	peared on bank staten	nents) \$
7.		nding checks otal of check amounts that have not appeared	l on bank statements)	\$
8.	A dinat	ed Balance (should agree with end of year ba	ank statement)	\$

^{**}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.



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	tion of Financial Institution)	
Savings account number		
1. Beginning Account Balance as of Septemb	er 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:	Expenses:	
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 1	Expenses line 4E from li	ne 3) \$
This certifies the above information is a correct staten	nent of financial activit	y 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 shouthe account.)	ld 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 then		en, copies of bills paid, itemized
(Fiscal Review Committee signature)		(Date)
(Fiscal Review Committee signature)		(Date)
(Fiscal Review Committee signature)		(Date)



COLLEGE OF AGRICULTURAL, CONSUMER & ENVIRONMENTAL SCIENCES

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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 fina	ncial statement is for the period Septemb	oer 1,through Au	ugust 31,	
	4-H Club	Name	Cou	nty	
	Employer Identification Number Checking account number				
	Name &	Location of Financial Institution			
1.	Beginni	ng Account Balance as of September 1, _			\$
2.	Income	Source:	Income:	*Itemization of Miscellaneous Income	
	A.	Donations	\$		
	В.	Fundraisers	\$		
	C.	Other/miscellaneous - itemizations*			
	D. ⁻	Total Income (add line A + B +C)	\$	Required if Income listed in Other	
3.	Beginni	ng Account Balance plus Total Income (a	dd line 1 + 2D)		\$
4.	Expense	e Categories	Expenses:		
	A.	Meeting expenses/speaker fees	\$	*Itemization of Miscellaneous Expenses	
	В.	Food/refreshments	\$		
	C.	Project manuals/workshops	\$		
	D.	4-H Program Fees	\$		
	E.	Trips	\$		
	F.	Awards/Scholarships	\$		
	G.	Community service activities	\$		
	Н.	Rental Fees**	\$		
	l.	Other/Miscellaneous* - itemizations	\$		
	J.	Total Expenses (add lines A-I)	\$	Descriped if Francisco listed in Other	
5.	Balance	e as of August 31, 20 (subtract expens	e line 4J from line 3)	Required if Expense listed in Other	\$
6.	Outstar	nding Deposits (subtract total of deposit a	amounts that have no	t appeared on bank statements)	\$
7.	Outstar	nding Checks (Add total of check amounts	s that have not appea	red on bank statements)	\$
8.	Adjuste	ed Balance (should agree with the end-of-	vear bank statement		\$
	•	s the above information is a correct state			•
	5 cer enre.		ment of manetar acti	vity for this 4 ff class.	
(4-H	l Club Treas	urer's signature) (Date)		(4-H Club Leader's Signature)	(Date)
		EW (REQUIRED : Committee should include			•
		amined the financial records including ba Club and find them in good order.	nk statements, check	s written, copies of bills paid, itemize	d deposit slips, and receipts
		Committee Signature) (Date)	<u> </u>	(Fiscal Review Committee Signature)	(Date)
(Fis	cal Review (Committee Signature) (Date)		

**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.





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 Sept	tember 1,through	n August 31,		
	4-H Club Name		County		
	Employer Identification Number		Savings account number		
	Name & Location of Financial Institution				
1.	Beginning Account Balance as of September	1,		\$	
2.	Income Source:	Income:	*Itemization of Miscellaneous Income		
	A. Donations	\$	_		
	B. Fundraisers	\$			
	C. Other/miscellaneous—itemizations*	\$			
	D. Total Income (add line A + B +C)	\$	Required if Income listed in Other		
3.	Beginning Account Balance plus Total Incom	e (add line 1 + 2D)		\$	
3.	Expense Categories	Expenses:			
	A. Transfer to checking account	\$	*Itemization of Miscellaneous Expenses ——		
	B. Other:	\$			
	C. Other:	\$			
	D. Other:	\$			
	E. Total Expenses (add lines A-D)	\$			
			Required if Expense listed in Other		
5.	Balance as of August 31, 2023 (subtract expe	ense line 4E from line 3	3)	\$	
Th	is certifies the above information is a correct s	statement of financial a	activity for this 4-H Club.		
			•		
(4-	H Club Treasurer's signature) (Date)	(4-H Club Leader's Signature)	(Date)	
FIS	SCAL REVIEW (REQUIRED : Committee should i	nclude a combination (of youth and adults without signatory rig	hts on the account.)	
W	e have examined the financial records includir	g bank statements, ch	ecks written, copies of bills paid, itemize	d deposit slips, and receipts	
on	this 4-H Club and find them in good order.				
(Fis	scal Review Committee Signature)	(Date)	(Fiscal Review Committee Signature)	(Date)	
(Fis	scal 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
			· · · · · · · · · · · · · · · · · · ·			
				Ш		

^{*}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

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

^{*}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

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

^{*}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	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

8/2023

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