



# 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.

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)





# 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, \_\_\_\_ through August 31, \_\_\_\_

4-H Club Name \_\_\_\_\_ County \_\_\_\_\_

Employer Identification Number \_\_\_\_\_ Checking 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	\$ _____	<div style="border: 1px solid black; width: 100%; height: 100%;"></div>
B. Fundraisers	\$ _____	
C. Other/miscellaneous - <b>itemizations*</b>	_____	
D. Total Income (add line A + B + C)	\$ _____	

**Required if Income listed in Other**

3. Beginning Account Balance plus Total Income (add line 1 + 2D) \$ \_\_\_\_\_

4. Expense Categories	Expenses:	*Itemization of Miscellaneous Expenses
A. Meeting expenses/speaker fees	\$ _____	<div style="border: 1px solid black; width: 100%; height: 100%;"></div>
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* - <b>itemizations</b>	\$ _____	
J. Total Expenses (add lines A-I)	\$ _____	

**Required if Expense listed in Other**

5. Balance as of August 31, 20\_\_ (subtract expense line 4J from line 3) \$ \_\_\_\_\_

6. Outstanding Deposits (subtract total of deposit amounts that have not appeared on bank statements) \$ \_\_\_\_\_

7. Outstanding Checks (Add total of check amounts that have not appeared on bank statements) \$ \_\_\_\_\_

8. Adjusted Balance (should agree with the **end-of-year** bank statement) \$ \_\_\_\_\_

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: 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.

\_\_\_\_\_  
(Fiscal Review Committee Signature) (Date)

\_\_\_\_\_  
(Fiscal Review Committee Signature) (Date)

\_\_\_\_\_  
(Fiscal 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 September 1, \_\_\_\_ through 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 Income (add line 1 + 2D) \$ \_\_\_\_\_

3. Expense Categories	Expenses:	*Itemization of Miscellaneous Expenses
A. Transfer to checking account	\$ _____	
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 expense 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:** 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.

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(Fiscal Review Committee Signature) (Date)

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(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 (-)	√	Deposit/Credit (+)	Balance
				<input type="checkbox"/>		
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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

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







## 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



**Illinois Extension**

UNIVERSITY OF ILLINOIS URBANA-CHAMPAIGN

