MEADOWLARK EXTENSION DISTRICT
4-H CLUB or AFFILIATED GROUP ANNUAL FINANCIAL REPORT
DUE NOVEMBER 1st, 2024

Name of club or affiliated group (include county name) _____

Financial Review Date_____

      Each year a financial committee of at least **two adult leaders** and **two 4-H members** will need to prepare a Financial Review of the financial records of your club or affiliated group. **Committee members should not be signatories on your group or club's financial accounts or have familial or financial relationships to the treasurer.**

Check or Savings Account Number	Bank Name	Beginning Bal. October 1, 2023	Ending Bal. September 30, 2024
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Please list your organization's employer identification number or **IRS Tax ID# or FEIN** _____

Our bank records are in the possession of: _____

Persons authorized to sign on your club or affiliated group financial account(s) _____

_____

List at least the five major financial events or activities of your club or group from the past year. Please include the income and expense from each of these events. _NOTE:_ There may only be INCOME or EXPENSE, simply list a zero as it applies.

EVENT or ACTIVITY   **INCOME/EXPENSE**

1. _____   _____

2. _____   _____

3. _____   _____

4. _____   _____

5. _____   _____

List any expenses or income that looks unusual:

1. _____

2. _____

This certifies that the financial review committee has reviewed the record keeping and financial balances and finds that they are *(Please check one as it applies):*

_____Are in Order (Complete back side of form and return to your local Extension Office)

_____Will Be in Order upon implementation of the recommendations listed below. (List below, complete back side of the form and return the form to your local Extension Office for further instructions or comments by the date due.)

_____ Require further review and action (Further review and actions should be done within 30 days of the original financial review if possible. Recommendations should be included on this form-use additional paper if needed. A written follow up must be submitted to your local Extension Office of any actions taken. Submit this form by the date due without signatures.)

(Please Complete Other Side)

The Club or Other Affiliated Financial Review Committee found the following conditions or concerns in the financial records:

_____

_____

_____

The Club or Other Affiliated Financial Review Committee makes the following recommendations:

_____

_____

_____

We have examined the treasury records of the club or affiliated group and believe all expenses and incomes to be accurate.
By signing I verify that I am not a family member of the treasurer of this account, am not personally a signatory on the account and have adhered to all the guidelines established for a Financial Review Committee member.

Name (Please Print)	Signature	Date
ADULT 1.		
ADULT 2.		
YOUTH 3.		
YOUTH 4.		
5.		

PLEASE KEEP A COPY OF THIS REPORT FOR YOUR CLUB'S FINANCIAL RECORDS

EXTENSION OFFICE USE BELOW

Date First Received In Office _____   Reviewed/Received By_____

_____ 1. All submitted information appears to be in order. No follow up information or actions are needed.

_____2. Corrections or additional information is needed as indicated: _____

_____

_____

_____

_____