4-H CLUB/GROUP or OTHER EXTENSION AFFILIATED GROUP

ANNUAL FINANCIAL REPORT

(to be completed by the Financial Review Committee)

Name of club or affiliated group ______________________________ Unit Name ____________________
Financial Review Date ________________________________

Each year a financial review committee for other Extension affiliated groups, consists of at least three
adults; for 4-H Club financial reviews of treasurer books, it is recommended two adults and two 4-H
members to demonstrate youth-adult partnerships. Committee members may not be signatories on
the group or club’s financial account(s) or have familial or financial relationships to the treasurer. In
the event you do not have enough members to make up a review committee or you are unable to do so
because of familial or financial relationships to the treasurer, you could consider asking a neighboring
club or non-member individuals to help complete the review.

<table>
<thead>
<tr>
<th>Type of Acct. – Checking, Savings, CD</th>
<th>Account Number</th>
<th>Bank Name and Location</th>
<th>Beginning Balance October 1</th>
<th>Ending Balance September 30</th>
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</thead>
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Please list the organization’s employer identification number or IRS Tax ID# or EIN _________________
The bank records are in the possession of: __________________________________________________________

ALL persons authorized to sign on the club or affiliated group financial account(s)

_____________________________________________________________________________________

________ Check here to indicate NO EXTENSION EMPLOYEES are authorized to sign for this/these
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.

<table>
<thead>
<tr>
<th>EVENT or ACTIVITY</th>
<th>INCOME</th>
<th>EXPENSE</th>
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<tbody>
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</table>
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 (Please check one as it applies):

_______Are in Order

_______Will be in Order upon implementation of the recommendations listed below. (List below 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).

The 4-H Club/Group or Other Affiliated Financial Review Committee found the following conditions or concerns in the financial records (attach additional paper if necessary):
_____________________________________________________________________________________
_____________________________________________________________________________________ 

The 4-H Club/Group or Other Affiliated Financial Review Committee makes the following recommendations (attach additional paper if necessary):
_____________________________________________________________________________________ 
_____________________________________________________________________________________

We have examined the treasury records of the club or affiliated group and believe all expenses and incomes to be accurate.
*Name (Please Print)     Signature    Date
1.___________________________________________________________________________________
2.___________________________________________________________________________________
3.___________________________________________________________________________________
4.___________________________________________________________________________________
5.___________________________________________________________________________________

*By signing I verify that I am not a family member of the treasurer of this account(s), am not personally a signatory on the account(s) and have adhered to all the guidelines established for a Financial Review Committee member.
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: __________________________
_____________________________________________________________________________________

Date approval was in Extension Council minutes _____________________________________________

This document was adapted from a form developed by the Meadowlark Extension District

KSU 4-3 (Dec 2020)