

ANNUAL CLUB FINANCIAL STATEMENT

Due in 4-H Office August 1st--Complete for Each Bank Account

COUNTY	Stanislaus	TREASURER'S NAME	
CLUB NAME		TREASURER'S PHONE	
EIN#		TREASURER'S EMAIL	

Checking Account		Savings Account (if any)	
Bank Name		Bank Name	
Last 4 Digits of Account Number		Last 4 Digits of Account Number	
Balance	\$ -	Balance	\$ -

Any CD or other

Bank Name			
Last 4 Digits of Account Number			
Balance	\$ -	Total of all Accounts	\$ -

BALANCE AT THE END OF PREVIOUS YEAR

MONTH	TOTAL INCOME	TOTAL EXPENSES	BALANCE
July			
August			
September			
October			
November			
December			
January			
February			
March			
April			
May			
June			
Total for the Year			
		Inventory Total Value	

Council Audit Committee has reviewed our books: Yes <u> </u> No <u> </u>

FUND RAISERS	\$ EARNED	EXPENSES
1.	\$ -	\$ -
2.		
3.		
4.		

Signature--Club Treasurer	Signature--Club Leader	Date
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