**Ohio 4-H Club/Affiliate Yearly Financial Summary**Due January 31

Program Year \_\_\_\_\_\_\_\_\_\_\_ Club/Affiliate Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Bank Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ EIN\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Account Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Bank Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Bank City/ST/Zip \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Type of Account (select one): \_\_\_\_Checking \_\_\_\_Savings \_\_\_\_Other (please list) -\_\_\_\_\_\_\_\_\_\_\_\_\_

Who is authorized to sign your checks? (Must have at least one name, preferably two names)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Beginning Account Balance as of Jan. 1** (should match bank statement) \_\_\_\_\_\_\_\_\_\_\_\_\_

**Club/Affiliate Income (please list)**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Description** (fundraiser, dues, etc.) | **Amount** |  | **Description** (fundraiser, dues, etc.) | **Amount** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| **Total Income** | | | |  |

**Club/Affiliate Expenses**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Description** (books, program fees, etc.) | **Amount** |  | **Description** (books, program fees, etc.) | **Amount** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| **Total Expenses** | | | |  |

**Ending Account Balance as of Dec. 31** (should match bank statement) \_\_\_\_\_\_\_\_\_\_\_\_\_

Name of person completing form \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_