ANNUAL FINANCIAL SUMMARY REPORT

Period Covered: October 1, _____ to September 30, ______

Balance: October 1  $__________
  Savings $________
  Checking $________
  CD(s) $________
  Other $________

Income (Add income of 12 monthly reports)  $__________
Indicate Major Sources of Income
  ____________________________ $________
  ____________________________ $________
  ____________________________ $________

Expenses (Add expenses of 12 monthly reports)  $__________
Indicate Major Sources of Expenses
  ____________________________ $________
  ____________________________ $________
  ____________________________ $________

Balance: September 30  $__________
  Savings $________
  Checking $________
  CD(s) $________
  Other $________

Audited by:  4-H Members (2 Signatures Required)  Adults (2 Signatures Required)
  ____________________________  ____________________________
  ____________________________  ____________________________

Date:  ____________________________  ____________________________

Note: Audit committee – two adults and two 4-H members, not related to each other or treasurer.

Due to:  Received by (Signatures):  Date:

County Extension Office – October 1  ____________________________  __________

State 4-H Office – December 1  ____________________________  __________