OHIO STATE UNIVERSITY EXTENSION

Ohio 4-H Committee Yearly Financial Summary Due October 29

| *Program Year: *Committee Name: County in which 4-H club is based: MEDINA | |
|--|---------------------------------------|
| Bank Information | |
| *Bank Name | *EIN |
| *Account #_ | <u> </u> |
| *Bank Address | |
| | State Ohio *Zip Code (of bank) |
| *Type of account O Checking O Savings O Othe | |
| Signer Name(s) **At least ONE name is required. List A | |
| | |
| | |
| | |
| | |
| *Beginning account balance as of January I (should | match bank statement) \$ |
| Club / Affiliata Incoma (4) | |
| Club / Affiliate Income (More space on page 2) Income Description (i.e., club dues, fund raisers, club premi | iums, etc.) Income Amount |
| income Description (i.e., club dues, luna laiseis, club premi | (timis, etc.) |
| | |
| - | \$ |
| Total Income (Total from p | |
| Total income (Total nom p | yaye 1 + Total Hottl paye 2) <u>y</u> |
| Club / Affiliate Expenses (More space on page 2) | |
| Expense Description (i.e., club dues, fund raisers, club pren | |
| | <u>\$</u> |
| - | <u> </u> |
| | <u> </u> |
| Total Expense (Total from | page 1 + Total from page 2) <u>\$</u> |
| *Ending account balance as of October 1st (should m | natch bank statement) \$ |
| | |
| Name of person completing this Ohio All Committee Vessels | Tinonoial Cummory Form Data |
| Name of person completing this Ohio 4-H Committee Yearly F | Financial Summary Form Date |

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| Committee Income (Con Income Description (i.e., c | ntinued from page 1) lub dues, fund raisers, club premiums, e | etc.) | Income Amount | | |
|--|---|----------------------------|---------------------------------|--|--|
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| Committee Evenences | (Continued from 1 1) | | | | |
| Committee Expenses (Expense Description (i.e., | club dues, fund raisers, club premiums, | iums, etc.) Expense Amount | | | |
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| | Voorly Audit Cont | | | | |
| | Yearly Audit Cert nittee? e will examine and verify the club / af affiliate's outgoing and incoming treat | filiate's money at the e | nd of the year. This can prever | | |
| Affiliates have the follow | rs and 2 advisors from at least 2 diffeing outgoing and incoming officers: Ceers as needed to make a total of fou | Chair; Secretary; and T | reasurer and one or two | | |
| The club/affiliate's treas | sury records were examined on | | and found to be correct. | | |
| | sury records were examined on been attached to this document. | | concerns were found. | | |
| Signature | Date | Signature | Date | | |
| Signature | Date | Signature | Date | | |

OHIO STATE UNIVERSITY EXTENSION

Medina County 4-H Committee Equipment Inventory

| Club Nam | Name | | Date | Date | | | | | |
|--------------------------------|----------------------------------|---------------------------------------|----------|------------|----------|--|--|--|--|
| Address where items are stored | | | | | | | | | |
| Number | Item | Description | Serial # | Value Each | Total | | | | |
| Ex. 1 | Table | Green and white lightweight and folds | 123456L | \$129.00 | \$129.00 | | | | |
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| | Total Value of 4-H Club Equipmen | | | | | | | | |
| Signature | | | | | | | | | |



