



Ohio 4-H Club / Affiliate Yearly Financial Summary

Due January 15

*Program Year: *Club / Affiliate Name:

*County in which 4-H club is based:

Bank Information

*Bank name: *EIN: *Account #:

*Bank address:

*City (of bank): State: *Zip Code:

*Type of account: Checking Savings Other

Add a signer name

Remove last signer name from list

Signer Name

*****At least ONE name is required. List ALL names authorized as signers for the above account.***

* **Beginning account balance as of January 1,** _____ *(should match bank statement):*

Club / Affiliate Income

<u>Income Description (i.e., club dues, fund raisers, club premiums, etc.)</u>	<u>Income Amount</u>

Total Income:

