

Phone:_

ANNUAL 4-H CLUB SUMMARY



EXTENSION

Local 4-H Clubs are non-profit organizations whose financial records must be available upon request. The Club Organizational Leader in cooperation with the Club Treasurer should complete this form at the end of each 4-H year - October 1 to September 30. Please complete this form and return to your respective county 4-H office by **October 15.**

Club Name	Town		
Organizational Leader	Phone		
Assistant/Co-Leader(s)			
Number of members Male Female	Non-BinaryOther		
Number of meetings held: Regular Special/Project	ct Outings		
Club is affiliated with the Connecticut 4-H FoundationYes	No		
Club will be continuing into next 4-H year. Yes No	(If not, why?)		
Community Service: What project(s) did your club complete this ye	ear?		
Number of youth participants Total number	er of hours		
How many youth served in a leadership role in your club?	_		
Please estimate the number of hours you, your assistant/co-leader capacity (club work, county committees, fair, etc.)	s or parents contributed to 4-H this past year in any		
Number of people Total number of hours	5		
Do club members complete record books? Yes No If	yes, how many members?		
Please indicate how many members are completing record books in the following project areas: (duplicates are allowed) STEM (examples include animal projects, robotics, gardening, photography/video) Leadership (examples include public speaking, community service, personal development) Health (examples include foods and nutrition, fitness, healthy lifestyles)			
What was your club's most successful educational program?			
What was your club's most important 4-H accomplishment this year?			
What did you do this year to promote 4-H? (If you have any news clippings, please attach a copy)			
Goals for the upcoming 4-H year.			
(Please use separate sheet of paper to complete questions as necessary)			
Person(s) completing this report			
Name Email			
Address			



ANNUAL 4-H CLUB FINANCIAL SUMMARY

All amounts need to be exact and are subject to audit



Club	Report for 20	to 20yea	r		
Does your group charge dues? If so, how mu					
Do you have donations or grants?YES	_NO If yes, attach I	list of all grants and in	ndividual donations of		
\$5,000 or more. Please include address and amount given.					
Bank Name: Bai	nk Acct. #:				
Balance at beginning of the year: Checking: \$	Savings: \$	Petty Cash: \$	Paypal: \$		
Venmo: \$	Other: \$	please specify type o	faccount		
INCOME		AMOUNT			
Contributions, grants received					
Program Revenue (e.g. entry fees)					
Club Dues					
Investment Income (e.g. interest)					
Fundraising event income					
Gross income from sales (e.g. candy, bake sale)					
Other revenue (attach detailed list/amounts)					
TOTAL INCOME					

EXPENSES			AMOUNT	
Contributions, donations made (p	lease provide the			
name, address and amount of any	v donations made			
to other organizations.)				
Cost of items sold (e.g. candy, t-sh	nirts)			
Postage, printing, office supplies				
Project supplies				
Club t-shirts				
Refreshments				
Event Registration				
Student Travel				
Insurance				
Other (attach detailed list/amoun	ts)			
TOTAL EXPENSES	5			
Total Income \$				
(minus) Total Expense - \$				
Total Profit or Loss \$				
Year End Balance Checking	g: \$Sav	ʻings: \$	Petty Cash: \$	Paypal: \$
Venmo: \$	Other:	\$ ple	ase specify type of acco	unt

*Please attach to this report documentation that shows proof of year-end balance for all active accounts. This can be a screen shot or copy of bank statement.

Signed	Date	
Organizational Leader		
Signed	Date	
Treasurer		