

New Jersey



4-H CLUB TREASURY ANNUAL REVIEW July 1 to June 30

All 4-H club treasuries must be reviewed annually. This review is to be conducted by someone outside of the club. Return this completed review form and a copy of your June bank statement to the Cumberland County 4-H office no later than **October 1**st.

4-H Club Name		Year
Account Information: Checking accoun	t Savings	s account
EIN		
Name of Bank	Location	
Account Signers:		
ANNUAL FINANCIAL REVIEW		<u>Amount</u>
Balance on hand, beginning of year		\$
Total income for year	(add)	\$
Total expenses for year	(subtract)	\$
Balance on hand, end of year	(total)	\$
CHECKLIST FOR REVIEWER		
Monthly Financial Reports are co	ompleted.	
All income is properly recorded.		
All expenses are properly recorde	ed.	
Bank statements were reviewed.		
Bank checkbook ledger is reconci	iled.	
List any expenses without receipts and/or		
Date Check # Payee	Expense (list item)	Reason/concern

Other Comments:		
I have examined the financial rec	ords of the above named club and have found them	to be:
In order		
In order, but in need of l	better organization or record keeping	
Not in order		
Suggestions for improvement:		
Date review was conducted:		_
Reviewer's Name	Signature	_
Reviewer's Name	Signature	
Treasurer's Name	Signature	_
*Leader's Name	Signature	_
*Reminder: All 4-H club leaders November 15. Contact the count	must file the 990-N ePostcard or Form 990 with the y 4-H staff for assistance.	e IRS by
FOR OFFI	ICE USE ONLY:	
Date Received:	Initials:	
Comments:		

Revised: 2016 Gloria Kraft