

*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

Signer Name

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

<input type="text"/>	<input type="text"/>
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* Beginning account balance as of January 1, (should match bank statement):

Club / Affiliate Income

Income Description (i.e., club dues, fund raisers, club premiums, etc.)

Income Amount

<input type="text"/>	<input type="text"/>
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Total Income:

Club / Affiliate Expenses

Expense Description (i.e., project books, member fees, booth supplies, awards, etc.)

Expense Amount

<input type="text"/>	<input type="text"/>
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Total Expenses:

Ending account balance as of December 31 (should match bank statement):

*Name of person completing this Ohio 4-H Club / Affiliate Yearly Financial Summary Form: