



Annual Review of 4-H Club or Group Fund

**Are signatures current and enrolled/approved 4-H volunteers or members? Yes or No. 2 signature
ARE required by IRS.**

If **NO**, what is being done to correct this?

Was there an annual proposed budget prepared? Yes or No.

If **NO**, what is being done to correct this?

Was a financial report and bank statement submitted? Yes or No.

If **no**, why?

Does this club/group have assets? Was the list provided? Yes or No.

If **NO**, what is being done to correct this?

Are there current financial rules outlined in the Bylaws? Yes or No.

If **NO**, what is being done to correct this?

Date: _____

Reviewer's Signature: _____

County Staff or Club/Group Organizational President