

Authorized Signature (1)

Authorized Signature (2)

Colorado 4-H Organization Financial Report Year Beginning July 1, 2023 - Year Ending June 30, 2024

4-H Club Name:				
Employer Identification Number (EIN):			_	
Organizational Leader:				
Treasurer:			_	
	•			
List ALL financial accounts: checking, savings, mo	ney market, etc;		Stanting Rolance	
			Starting Balance (ending balance from	
Include all account details:	Account	Account Type	last year's report	Ending Balance as of
Financial Institution	Number	(Savings/Checking)	June 30, 2023)	June 30, 2024
		_	, 0,	•
				\$ -
			\$ -	\$ -
		Totals	-	\$ -
Persons authorized to sign checks, deposit and withdraw fu	ınds. <mark>Two signatures</mark> a	are required.		
			_	
			_	
			_	
	T 1	G		
A 1 T	Financial	Summary	Talica di Dala	
Annual Income	Ċ		Total Starting Balance	:
Activity/Event fees *Donations/Grants/Contributions	<u>\$</u> - \$ -		\$ -	
	\$ -			
**Fundraising 4-H Membership Dues/Fees	\$ -			
Awards/Scholarhips	\$ -			
Investment Income (Interest)	<u>\$</u> -			
Other (list below)	<u> </u>			
\$ -				
\$ -				
\$ -				
Other Total:	\$ -			
	Total Income	ş -		
Annual Expenses	_		_	
Educational Activities/Events	\$ -			
Supplies	\$ -			
4-H Membership Dues/Fees	\$ -			
Fundraising Expense	\$ -			
Scholarships/Monetary Awards	\$ -			
Recognition/Trophies/Non-monetary Awards	\$ -			
Bank Fees	\$ -			
Other (list below)				
\$ -				
\$ -				
\$ -				
Other Total:				
	Total Expenses	<u>-</u>	_	Total Ending Balance
				\$ -
*Did you have one or more donation that grossed over \$5,0	•			
**Did you have one or more fundraiser that grossed over \$	5,000 (yes or no)?		-	
TO INTEGER OF THE COLUMN AS A SECOND	1	1/ . 1 1		
If you answered YES to either of the above questions, list the	ne event/person and amo	ount raised/given below:		
Name of Event on Dance	Dagovintia	of Event/Denon - 44	Data(a)	Amorrat
Name of Event or Donor	Description (of Event/Donor gift	Date(s)	Amount
				\$ - \$
				\$ - \$
				\$ - \$ -
				-
We believe the above information to be an account.	mont accounting of A II C	unda Wa undanstand that Cala	modo Ctato Universita la acul	no logal authorites
We believe the above information to be an accurate and co	rrect accounting of 4-H I	unas, we understand that Cold	nauo state University has th	ne regar authority, under

federal and state law, to request and obtain information, freeze, and designate authorized signatures in regard to 4-H accounts in the event of suspicious activity.

Date

Date





ASSETS: Please any assets the 4-H club/group owns which **value greater than \$50**. Assets are any tangible property the 4-H club/group owns. These will vary based on each 4-H club/group. Example: a shooting sports club may own archery equipment whereas a livestock club may own scales for weighing projects. Because these items were purchased by (or donated to) the 4-H club/group, it's important to list and account for them along with any funds in the 4-H club/group treasury.

Please use the table below to list all assets. (add additional pages as needed)

Description of Asset	Model Number (if applicable)	Serial Number (if applicable)	Estimated Value	Person Responsible
	(п аррисавіе)	(п аррисавіе)		for Asset



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:
bato

County Staff or Club/Group Organizational President



4-H CLUB OR GROUP BUDGET

A budget for each 4-H club or group is **required** for chartering if the 4-H club or group accepts or disburses any money.

The budget can be as simple or complex as needed for 4-H club or group members to clearly understand how

	<u>ly 2024</u>	to End Date	September 2025
			Total Opening Balan
ESTIMATED IN	COME (SOURCE, I	JSE, PURPOSE)	BUDGETED
		Total Inco	me \$
ESTIMATED EV	DENSES (DESCRI		
ESTIMATED EX	(PENSES (DESCRI		me \$BUDGETED
ESTIMATED EX	(PENSES (DESCRI		
ESTIMATED EX	(PENSES (DESCRI		
ESTIMATED EX	(PENSES (DESCRI		
ESTIMATED EX	(PENSES (DESCRI		



4-H Club/Group Annual Plan for 2024-2025

Month Date Time/Locatio	Business Agenda Events Activities Items for group decision	Program Agenda Educational program or activity Speakers Demonstrations	Recreation Agenda Singing Games Team Building Refreshments	Community Service Project	Essential Elements Belonging - B Independence - I Generosity - G Mastery - M	Special Events Club County Regional State
October						
November						
December						
January						
February						
March						
April						
Мау						
June						
July						
August						
September						



Organized 4-H Club or Group Annual Affirmative Action Report

Colorado 4-H is committed to providing an environment that is free from discrimination and harassment based on race, age, creed, color, religion, national origin or ancestry, sex, gender, disability, veteran status, genetic information, sexual orientation, gender identity/expression, or pregnancy in its employment, programs, services and activities, and admissions. **Compliance Statement:** This club provides opportunities for all participants, and is open for membership to all youth 4-H ages 5-18 years based on December 31 current 4-H year.

This form, completed and returned to the local CSU Extension office is necessary to allow CSU Extension, under the law, to provide support to a 4-H club and to extend the organized club or group the right to use the 4-H name and emblem. Please indicate below what your club is doing or has done to encourage participation by all potential youth in your area. Examples: list any mass media used (newspaper, radio, TV) and/or list personal letters, circulars, or personal visits to potential minority recipients, inviting them to participate (include dates and places of meetings or planned activities.) Attach copies of correspondence, news releases, etc. to this form. Use form below to document **All Reasonable Effort**.

Signed by County Staff or Organizational Leader	
---	--

✓	Methods	Date	Number	Location	Ethnicity/Race	Comments
	Mass Media, including radio, newspaper, TV					
	Newsletters, posters, flyers, announcements					
	Personal letters inviting select people to participate in the program					
	Personal contacts (phone, in person) to inform them about 4-H and encourage their participation (potential members and adult volunteers)					
	Community and school groups contacted with information or through community service					
	Joint activities that resulted in integrated programs					
	Membership drive or promotional programs to reach minorities (e.g. festivals, fairs)					
	Volunteer recruitment and/or volunteer development training					
	Meeting places selected to encourage minority participation					
	Other					

Colorado State University Extension is an equal opportunity provider. | Colorado State University Extension es un proveedor que ofrece igualdad de oportunidades.

Colorado State University does not discriminate on the basis of disability and is committed to providing reasonable accommodations. | Colorado State University no discrimina por motivos de discapacidad y se compromete a proporcionar adaptaciones razonables.

CSU's Office of Engagement and Extension ensures meaningful access and equal opportunities to participate to individuals whose first language is not English. | Office of Engagement and Extension de CSU garantiza acceso significativo e igualdad de oportunidades para participar a las personas quienes su primer idioma no es el inglés.

https://col.st/0WM/A