



Fund Raising Report

Complete immediately following your event.

Purpose: To verify fundraising events are in compliance with all 4-H regulations. Please raise funds for a purpose, deposit all funds collected in a group bank account (no personal accounts), and report total income. Request further information from the Clark County 4-H Office.

Date: _____

Club Name: _____

Group Tax ID#: _____ **Bank:** _____

Club Leader: _____ **Phone:** _____

Address: _____

Type of Fundraiser: _____

Date & Place of Fundraiser: _____

Purpose of Fundraiser: _____

Donations were accepted in the name of 4-H from the following individuals or businesses:

Total Income: \$ _____

Total Expenses: \$ _____
Remember to keep all receipts!

Total Profit (income, less expenses) \$ _____

Comments:

Signature (Fundraising Chairman): _____

Return form to 4-H Office 30 days prior to event. Received in Office: _____