

4-H Fundraiser Approval Form



Please fill in the following information and return to the Extension Office **prior** to the fundraising event. This includes both club and countywide fundraisers. Please use a separate form for each fundraiser. Guidelines for 4-H Fundraisers can be found on pages 33-34 of the Montana 4-H Treasurer's Book (2012 version).

Club/Group Name: _____ **Adult Contact:** _____



Phone: (h) _____ **(c)** _____ **Email:** _____

Details of Fundraising Activity: _____

Date(s) of Activity: _____ **Location of Activity:** _____

This fundraiser plans to (check one or more of the following):

- Raffle
 - Permit needed
 - Sample of ticket
- Use the 4-H Name
- Use the 4-H Clover/Emblem
- Use the 4-H Building

 **A report must be filed within 60 days of completing the fundraiser with the Extension Office.** 

Money is being raised for (be specific): _____

Return to the Extension Office prior to the fundraiser for approval.

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- The event is considered a fundraiser for the club / county. (Circle one)
- The Extension Agent approves this event.

**Comments:** \_\_\_\_\_

\_\_\_\_\_  
Extension Agent

\_\_\_\_\_  
Date

## 4-H Fundraiser Report

As stated in the Montana 4-H Treasurer's Book, a financial report must be given to the county Extension Agent within sixty (60) days after the conclusion of the fundraising event. If such reports are not filed, the MSU Internal Auditor will be contacted to conduct an investigation. Please use this form to report your fundraiser **after** the event.



**Has your fundraiser been approved by the County Extension Agent (circle)?**      **YES**      **NO**  
*If you responded NO, please attach a Fundraiser Approval Form.*

**Club/Group Name** \_\_\_\_\_ **Adult Contact** \_\_\_\_\_

**Phone: (h)** \_\_\_\_\_ **(c)** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Details of Fundraising Activity:** \_\_\_\_\_

\_\_\_\_\_

**Date(s) of Activity:** \_\_\_\_\_ **Location of Activity:** \_\_\_\_\_

**Income from Fundraising Activity:**      (a) \_\_\_\_\_

**Expenses from Fundraising Activity:**      (b) \_\_\_\_\_

Please list general expenses: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



**Profits from Fundraising Activity:** (a) minus (b) \_\_\_\_\_

**Return to the Extension Office after to the fundraiser for reporting.**

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Date Received: _____ **Date Reviewed:** _____

Comments: _____

 Extension Agent Review Signature