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| --- |
| **PEER REVIEW OF GROUP FINANCIAL RECORDS: COVER SHEET** |
|  |  |
|  |  |
| Master Gardener [ ]  4-H [ ]  |  |
|  |  |
|  |  |
| County |       | [ ]  | Jan 1 |       | - | Dec 31 |       |  |
|  |  |  |  |  |  |  |  |  |
|  |  | [ ]  | Jul 1 |       | - | Jun 30 |       |  |
|  |  |  |  |  |  |  |  |  |
|  |  | [ ]  | Oct 1 |       | - | Sep 30 |       |  |
|  |  |  |  |  |  |  |  |  |
|  |  |
| Checking Account Number: |       |  |  |
|  |  |
| Bank |       | Address |       |  |
|  |  |
| IRS Tax ID# (form SS-4) |       | Audit Date |       |  |
|  |  |  |  |  |
|  |  |  |  |  |
| Persons Authourized to sign on checking account: |  |
|  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| Name |       | Address |       |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| Name |       | Address |       |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| Bank records are in the possession of: |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| Name |       | Address |       |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| NOTE: | Attach copy of the year-end bank statement. |  |
|  |  |  |  |  |
|  | Send to:  | Office of CFO | Complete within 90 days after financial year end and provide copy to County Extension Office. |  |
|  |  | UACES |  |  |
|  |       | 2301 South University Ave |  |  |
|  |  | Little Rock, AR 72204 |  |  |