



# Arkansas Extension Homemakers Council/Club Peer Review of Group Financial Records: Report

County \_\_\_\_\_ July 1 through June 30 \_\_\_\_\_

Council/Club Name \_\_\_\_\_

- |   |  |
|---|--|
| <input type="checkbox"/> Group budget and any addendums | <input type="checkbox"/> Canceled checks and deposit slips |
| <input type="checkbox"/> Treasurer's ledger reports     | <input type="checkbox"/> Receipts for all income           |
| <input type="checkbox"/> Bank Statements                | <input type="checkbox"/> Bills for all expenses            |
| <input type="checkbox"/> Year-end Financial Report      | <input type="checkbox"/> Inventory Records                 |
| <input type="checkbox"/> Group Cash Handling Procedures |  |

**The Review Committee found the following conditions:**

**The Review Committee makes the following recommendations:**

This certifies that the Review Committee has reviewed the recordkeeping and financial balances and finds them:

- In order;
- In order upon implementation of recommendation;
- Requiring further review and action.

\_\_\_\_\_  
Signatures of Review Committee

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
City

\_\_\_\_\_  
Signatures of Review Committee

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
City



# Arkansas Extension Homemakers Council/Club

## Peer Review of Group Financial Records

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County \_\_\_\_\_ July 1 through June 30 \_\_\_\_\_

Council/Club Name \_\_\_\_\_

Checking Account Number \_\_\_\_\_

Bank Name \_\_\_\_\_

Bank Address \_\_\_\_\_

IRS EIN # \_\_\_\_\_ Audit Date \_\_\_\_\_

Persons Authorized 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 or report statement. Send pages 1 & 2 to:

AEHC Admin  
2301 S. University Ave.  
Little Rock, AR 72204