## **County 4-H Fund-Raising Report Form**

Complete and return this form to the within 10 business days after the approved fund-raising activity.		County 4-H staff
4-H Group name		
Group address		Phone
Person making report:	Phone:	Email:
What was the approved fund-raising	g activity?	
Where and when did the approved f	fund-raising activity take place?	
What knowledge did the group gain	h through this activity?	
What skills did the group develop fr	om participation in the fund-raisir	g activity?
Income from approved fund-raising activity		<u>.</u>
Expenses from approved fund-raisin (List general expenses below)	ng activity <b>minus</b> \$	<u>.</u>
Sales tax collected on tangible, pers *For example, craft items, tack, cook immediately such as concession star	sonal property* <b>minus</b> \$ kbooks, calendars, plat books, bull	etins and food that will be consumed
-		57 (Income: ÷ 17.67 =).
	ude the income and expenses in t check will be reflected in next yea lichigan State University."	available when the payment is he group's Annual Financial Summary ar's AFSR. If the group remits the tax
<b>Prize Winners</b> <b>If prizes were awarded, complete th</b> valued at \$600 or more require the Attach the W-9 to this report. MSU	recipient complete IRS Form W-9	
Name	Prize	Prize Value (Actual or Fair Market Value)

## Return to:

Staff Name \_\_\_\_\_\_ Address \_\_\_\_\_