

Form 8.8 – Monthly Statement of Cash Collections

4-H Unit or VMO:

Name of banking institution funds will be deposited into:

Date	Name (First & Last)	Fundraising Activities	Donations	Gifts	Other	Total Amount
		\$	\$	\$	\$	\$
	TOTAL INCOME	\$	\$	\$	\$	\$

I hereby certify that I have received the amount of money indicated above for the stated purpose.
(Must be signed by two individuals, one being an unrelated adult.)

Name (print name)	Signature	Date
4-H Adult Volunteer (print name)	Signature	Date