

**APPLICATION FOR WAIVER
OF
BOND REQUIREMENTS**

I. Chapter/State Council Name: _____

II. Mailing Address: _____

III. Telephone number: () _____ - _____ fax number: () _____ - _____

III. Please answer the following questions completely and as accurately as possible.

A. Audit. What steps are taken by auditing committee to certify that the information contained within the annual financial report is true, correct, and complete.

B. Policy & Procedures. Is there a formal policy & procedures manual? Yes/No
If yes, please attach a copy. If no, please answer each question in detail.

Are requests for travel submitted in writing including the name of the traveler, dates of travel, destination and purpose? If no, please explain in detail how your cash disbursements can be accurate or how the financial reports are accurate?

How many bank accounts are maintained by your chapter? _____

Are two signatures required for issuing checks? If not, why?

Are any checks issued without an officer's signature? If yes, why?

Are purchase orders required for expenditures over a certain dollar amount? If yes, what amount? If no, why not?

What dollar amount requires a receipt for payment to be made? If no receipt is required, why?

Are bank statements reconciled monthly? If not, why?

Are all incoming checks immediately stamped for deposit only? If not, why?

Are all blank checks maintained under lock and key? If not, how are blank checks protected?

Please list all sources of income.

What is the total amount of chapter assets?

What was the largest balance in your account in the past 12 months? _____

What was the chapter expenditures in the past 90 days? _____

C. Record Retention. The following records are permanent corporate documents. Please explain how and where these records are secured.

Annual financial reports and tax records.

Checks and check registers

Receipts and disbursements records

Fixed assets and property records

Corporate minutes

Report submitted by: _____

Date: _____

Please list the name and telephone number of the following:

Chapter President: _____ () _____ - _____

Chapter Treasurer: _____ () _____ - _____

