

Annual Review of Support Group Fund

(Information to be provided by support group)

a. Account Name: _____

Is this a proper account name? Yes No

If no, how should the account name be changed?

b. Employer Tax ID Number: _____

Is this a legitimate ID Number? Yes No

If no, what should be done to acquire an Employer Tax ID Number?

c. Whose signatures are on this account?

Are these acceptable signatures? Yes No

If no, what should be changed?

d. Is there an annual budget for this account number? Yes No

If no, what should be done to prepare a budget?

e. Is there a current bank statement for this account? Yes No

f. Is tangible property owned by this support group? Yes No

If yes, provide a list of property. (Example: computer, printer, spray tank, trailer, etc.)

g. Are there standing rules for this support group? Yes No

If no, what should be done to prepare standing rules?

h. Are there investment policies for this support group? Yes No

If no, what should be done to prepare investment policies?

Submitted by (Volunteer) Date

Reviewed by (Agent) Date

Approved by (DEA/CED) Date