

PRIVATE ORGANIZATION CHECK LIST

NAME OF PRIVATE ORG.:

INITIAL APPROVAL REPORTING REVALIDATION

- A. APPROVAL LETTER (to be completed after final review)
- B. REQUEST LETTER
- C. CHARTER, ARTICLES OF AGREEMENT, CONSTITUTION, BYLAWS
 - Parent organization documentation (if applicable)
 - Nature, function, objective of organization
 - Planned use of funds
 - Activities
 - Membership eligibility
 - Responsibilities of all management functions
 - Accountability of assets
 - Disposition of remaining assets upon breakup
 - PO's liability if assets are not enough to cover all PO liabilities
 - Statement liability to include provision that all State and jurisdictional laws are met
 - Extent of members' personal liability for debts of, or claims against the PO
 - Agreement to reimburse the Army for utility expenses, unless use is incidental (would cost more to bill and collect than it costs to provide service)
 - PO will neither propagate extremist activities nor advocate violence against others or the violent overthrow of the Government.
 - PO activities will not seek to deprive individuals of their civil rights.

Members do not personally profit from PO income, except through – salaries and wages as PO employee; award recognition for services rendered to PO or community; membership in an investment club

Documentation of any changes to previously approved constitution, by-laws, charter, articles of agreement, etc.

D. MEETING MINUTES OR SUMMARIES

E. LIST OF CURRENT OFFICERS (name, address, phone, email)

F. FINANCIAL STATEMENTS / AUDIT REPORT COPIES

G. IRS & STATE OF HAWAII TAX INFORMATION

H. LIABILITY INSURANCE (coverage and limitations)

I. REAL ESTATE CONTRACT / MOU (if applicable)

Meetings:

_____ Jan, Feb, Mar, Apr, May, Jun, Jul, Aug, Sep, Oct, Nov, Dec

_____ Jan, Feb, Mar, Apr, May, Jun, Jul, Aug, Sep, Oct, Nov, Dec

_____ Jan, Feb, Mar, Apr, May, Jun, Jul, Aug, Sep, Oct, Nov, Dec

Financials:

_____ Jan, Feb, Mar, Apr, May, Jun, Jul, Aug, Sep, Oct, Nov, Dec

_____ Jan, Feb, Mar, Apr, May, Jun, Jul, Aug, Sep, Oct, Nov, Dec

_____ Jan, Feb, Mar, Apr, May, Jun, Jul, Aug, Sep, Oct, Nov, Dec

Audits: _____ 1st year _____ 2nd Year