

CERTIFICATION — EXAMINATION POST BOOKS OF ACCOUNT

DEPARTMENT BY-LAWS — ARTICLE V

“Each Post shall keep books of account, and shall cause said books to be examined by a licensed accountant or a committee of three (3) competent persons, none of whom shall be the Commander, Adjutant, Finance Officer or any other person charged with the responsibility of handling Post funds. Such examination shall be made within 90 days following installation of Post Officers, and for the period of the immediate preceding fiscal year of the Post, said fiscal year shall be determined by the Post. Each Post shall certify to the Department Adjutant prior to December 1 each year that such an examination has been made and file the original thereof with the Department Adjutant before said date, with a copy thereof to the District Commander of the District of said Post. The Department Commander, the Post Commander, or the Post Executive may order an audit of the books of account at such other times during the current year as may be deemed advisable. Failure of the Post to meet any of the requirements of this section within said times or any general or special extension thereof, shall be deemed a delinquency and the delegates of such Post shall not be entitled to be accredited at the Department Convention. The certification to the Department Adjutant and the certification must be on forms furnished by the Department Adjutant’s Office.”

NOTE: Examination of Post books of account not prepared in accordance with above Constitutional requirements may nullify Post Fidelity Bond in case of a loss.

I (we) hereby certify that an examination of Post books of account, including complete verification of all securities and bank balances, was made on the _____ DAY OF _____, 20____ in the City OF _____, CALIFORNIA, covering the period from the _____ DAY OF _____, 20____ to the _____ DAY OF _____, 20____, in accordance with ARTICLE V, Section 9 of the Department By-Laws.

EXAMINATION COMMITTEE: *None of whom shall be the Commander, Adjutant, Finance Officer, or any other person charged with the responsibility of handling Post funds.*

NAME	ADDRESS	CITY
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____

OR

LICENSED ACCOUNTANT

(ATTEST)

POST ADJUTANT _____ POST COMMANDER _____

POST NAME _____ POST NO. _____ DISTRICT NO. _____

Send completed Certification to Department Adjutant, District Adjutant and retain copy for post. (2017)