

# Annual Certification Report

As of June 30, \_\_\_\_\_

For \_\_\_\_\_  
(Name of Booster Group)

I certify that our organization has complied with the following directives set forth in Policy 618.1/Nonprofit Organizations adopted by the Conemaugh Township Area School Board of Directors on January 18, 2005:

- Two signatures were required for the issuance of all checks drawn on the organization's accounts, and checks were co-signed by officers of the organization.
- Receipts were required for all purchases and are maintained with the Treasurer's records.
- Spouses have not been permitted to be co-signers of checks.
- The Treasurer has prepared regular meeting reports to the organization's members listing approved expenditures, receipts, and end-of-the month balances and/or bank statements.
- An annual audit (internal or professional) of the fund has been performed.

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*Title*

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*Title*

\_\_\_\_\_  
*Date*