

### Annual Review of Support Group Fund

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

In 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 there a list of tangible property owned by this support group?       Yes       No

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

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

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
Supervisor

\_\_\_\_\_  
Managing Agent