

Wildlife Action Chapter Closing Procedures

s a non-profit 501 (c) (3) organization, all funds which come into our possession from any source and by any method, shall be used exclusively for conservation - related purposes consistent with Wildlife Action. Funds will not be given to any other organization unless approved by the National CEO. Funds shall not be allowed to constitute a profit for our chapter members. Therefore all funds, property and inventory shall revert back to National Headquarters for proper disbursement upon completion of this form.

CHAPTER NAM	1E:				
				(chapter presider	nt signature)
	CITY:				
BANK NAME: CHECKING ACCOUNT #:					
BANK ADDRES	S:	CITY:	S	TATE:	_ ZIP:
The Local President will contact the State President if the chapter is experiencing problems and considering closing. Notification shall be in writing, with a copy to the National President/CEO (P.O. Box 866, Mullins, S.C., 29574). National will be responsible for sending a copy to the Regional VP.					
The State President will make every effort to assist the chapter experiencing problems. He will initiate a reorganization of the Local Chapter, requesting the State President assign a temporary Local President. THIS WILL BE CONSIDERED THE LAST RESORT PRIOR TO DISSOLVING THE CHAPTER.					
of the Local Chapter does not receive adequate assistance, the Local Chapter President should contact the National President/CEO.					
Since National is ultimately responsible for all chapter assets and debts, the following will be promptly returned to National Headquarters upon chapter closing and/or merging with another chapter.					
(1.)	a. all funds from checking account b. all funds from savings account c. all funds from mutual funds, stocks,	CD's , etc.		sed checks celled checks, ba nventory, both rea	
(2.)	The chapter will mail a newsletter to each men with another chapter. Members will be given the NEWSLETTER.				
(3.)	Chapters relinquish all special projects. The S work on past special projects of closing or mer		has the option to	allow other chap	ters to
NATIONAL OFFICIAL USE ONLY: DATE:					
Items 1, 2, 3 above have been completed. Yes No					
Comments:					
PRESIDENT/CEO APPROVED: NOT APPROVED: DATE:					

WLA FORM #44