



**Wisconsin Association for
Home & Community Education, Inc.**

(SAMPLE LETTER TO DISBANDING CLUB)

Date

TO:

From: Name of county President, County

RE: DISBANDING FORM

We are sorry that your club has decided to disband. Our 501(c)3 non-profit status federal guidelines require us to retain a statement of how your treasury money was expended. The enclosed Club Disbanding Form will help you complete this process. Please return the completed form to your county President as soon as possible.

Please check with your county treasurer to make sure all your county commitments such as club dues, Pennies for Friendship, etc., are paid in full when you disburse your club's treasury. Your club should show a balance of \$0 when you close your books.

Please be aware that if we should be audited in years to come, your club will be responsible to show receipts and/or canceled checks reflecting your donations to other non-profit s. Please keep your records for seven years.

Thank you for your past efforts in our community in the name of HCE.

Sincerely,

County President

Enc.



**Wisconsin Association for
Home & Community Education Inc.**

CLUB DISBANDING FORM

TO: _____ County HCE

Date: _____

FROM: _____ Club

Check one:

_____ As prepared by Treasurer and President and approved by club members.

_____ Approved by appointed auditing committee

Date of Disbanding _____

Reason for Disbanding:

List the person that will be retaining the records for seven years:

Name: _____

Address: _____

Phone number: _____

It is assumed that there was money in your treasury at the time of the decision to disband. Please explain how this money was disbursed, including dates, amounts, and payee names, bringing your balance down to zero. This report is due within 90 days of disbanding.

Signature of Club President or Officer: _____

Address: _____

Phone number: _____



Financial Records

Club: _____

County: _____

Check One:

_____ As prepared by the Treasurer and President and approved by the club members.

_____ Approved by an appointed auditing committee.

Balance on Hand: _____ (Checking, savings, CD's, cash, etc.)

Date of Disbanding: _____

Name of person retaining club records: _____

Address: _____

Date: _____ Amount given: _____

Name of non-profit organization: _____

Name of person accepting donation: _____

Date: _____ Amount given: _____

Name of non-profit organization: _____

Name of person accepting donation: _____

Date: _____ Amount given: _____

Name of non-profit organization: _____

Name of person accepting donation: _____

Date: _____ Amount given: _____

Name of non-profit organization: _____

Name of person accepting donation: _____

(For your records, you could staple the receipts to this sheet.)

Signature of Club President

Due 90 days after club disbands.

