

Kamehameha Middle School
Kapālama

Date:

To: Gail Yannatta
Student Activities Coordinator

Re: AUTHORIZATION TO OPEN STUDENT GROUP CHECKING ACCOUNT

_____ has requested to open a checking
(Name of Group)
account. The group's advisor(s) _____

has (have) signed a statement acknowledging the following procedures:

1. The group has been approved and sanctioned by the ASKMS Executive Council for the current school year.
2. All Check Requests and Cash Advancements must bear the signatures of the authorized signer(s) to transact business on the account AND that of the Student Activities Coordinator.
3. Appropriate documentation must accompany Check Requests and Cash Advancement requests.
4. Fundraising Requests must be submitted at least fourteen days prior to the event and are limited to no longer than five consecutive days.
5. Completion of Fundraiser Deposit Form is required within two days of completion of fundraiser.
6. All fundraising is subject to a 4.5% state excise tax on gross income.

The principal advisor for the group shall be _____

And the second signature shall be _____

The advisor's signature below constitutes his/her understanding and agreement with the above statements.

Advisor Date _____

Request approved by _____ Date _____
Student Activities Coordinator