

**APPENDIX I**



**Chapter Treasurer Report**

Chapter \_\_\_\_\_

Date of Report \_\_\_\_\_

Current Checking Account Balance \_\_\_\_\_

**Account Activity**

*Please list all account activity since the last treasurer's report was submitted.*

Date Last Treasurer's Report  
Submitted \_\_\_\_\_

Checking Account Balance on  
Date of Last Report \_\_\_\_\_

Total Deposits \_\_\_\_\_

Total Payouts \_\_\_\_\_

**Bank Statement**

*Please submit a copy of your latest Bank Statement with this report.*

Your Email Address \_\_\_\_\_

*Please send this report to:*  
  
PARMA  
1 Capitol Mall, Suite 800  
Sacramento, CA 95814  
or  
[ed@parma.com](mailto:ed@parma.com)  
or  
fax: 916-444-7462