

From:

To: Director, Marine Corps Community Services, MCB Camp Butler

Subj: REQUEST FOR APPROVAL OF PRIVATE ORGANIZATION

Ref: (a) MCIPAC-MCBBO 5760.2

Encl: (1) Organization Constitution

(2) Organization Bylaws

(3) Annual Budget Forecast

1. Per the reference, request the organization titled and described as follows be granted authority to function aboard Marine Corps Installations Pacific facilities and areas as a sanctioned Private Organization (PO).

2. Organizational information:

a. Name of Organization:

b. Principal Officers': (*government email addresses are not permitted*)

(1) **President:**

Name:	
E-Mail Address:	
Mailing Address:	
Day Phone:	
Evening Phone:	

(2) **Vice-President:**

Name:	
E-Mail Address:	
Mailing Address:	
Day Phone:	
Evening Phone:	

(3) **Treasurer:**

Name:	
E-Mail Address:	
Mailing Address:	
Day Phone:	
Evening Phone:	

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(4) **Secretary:**

Name:	
E-Mail Address:	
Mailing Address:	
Day Phone:	
Evening Phone:	

c. Anticipated annual revenues:

d. Anticipated annual expenses:

e. Will any officer/member of the organization receive wages or salaries as an employee or remuneration for services rendered? Yes      No

\*If "Yes," please include a narrative statement identifying the number of PO employees or contractors, purpose, their positions, and their estimated amount of compensation (hourly wages or annual salaries), each listed by position in the enclosure, "BUDGET FORECAST."

f. Will a Military Banking Facility account be required?

Yes  No  \*If "No," but you have a bank account; please state the name of the bank

If Yes, which MBF will be used? Community Bank  NFCU

g. Employer Identification Number (EIN):

h. The reporting period for the organization will be:

- (1)  Calendar Year (01 January - 31 December)
- (2)  School Year (01 July - 30 June)
- (3)  Fiscal Year (01 October - 30 September)
- (4)  IRS Requirement (tax-exempt organizations)

i. Enclosures (1) and (2), the Constitution and Bylaws of this organization, respectively, have been duly approved and adopted by the membership of the organization:

(1) fairly represent the nature, function and objectives of this organization.

(2) define the eligibility for local membership and certify that the majority of members will be primarily from the DoD family.

(3) set forth the responsibilities for all management functions to include accountability of assets, coverage and limitation of insurance, disposition of remaining assets upon dissolution of the PO, and assure responsible financial management; and

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(4) include a statement of the POs liability if assets are not enough to cover all PO liabilities and address the extent of PO members' personal liability for debts of or claims against the PO.

j. It is acknowledged that this organization is not a government instrumentality and is not entitled to the immunities and privileges afforded government agencies.

k. It is acknowledged that this organization is responsible for all taxes and insurance required by applicable laws.

l. This organization agrees to comply with all applicable installation regulations and directives.

Signature of President

Printed Name of President