



Northbrook Woman's Club Foundation & Northbrook Woman's Club

Financial Procedures for Request for Payment and Funds Deposit Processing

Introduction

The purpose of this document is to provide specific instructions for Committee Chairs to ensure that the accounting records of NWC/NWCF are complete and properly documented. As tax-exempt organizations, it is critical our records contain adequate support for all receipts and disbursements. It is also important we safeguard our assets by implementing a system of "checks and balances." These procedures also ensure compliance with State and Federal 501(c)3 requirements.

PLEASE REMEMBER

All payments and deposits must be submitted to a Committee Chair. This will enable the Committee Chair to oversee the income and expenditures for the various committee activities and to closely monitor the committee's budget. ***It is the responsibility of each Committee Chairperson*** to confirm that proper documentation is provided to the Treasurer for deposits, payment of bills and reimbursement of expenses to Club and Foundation members. The Treasurers cannot reimburse a member for expenses if appropriate documentation is not attached to the payment request.

Any expenditure outside of a committee's approved budget must be pre-approved by the President or Budget Chair. Pre-approval will be confirmed and documented in an email to the requester from the President or Budget Chair. A copy of the approval email must be submitted with the Request for Payment form. Additionally, any expenditure significantly exceeding budget (+20%) should be explained on the payment form.

Expenditures for the Foundation are tax-exempt. Any state sales tax paid for Foundation expenses will not be reimbursed. The Foundation's Illinois Sales Tax Exemption Certificate is available from the Treasurers and on the Club's website. It should be presented when making purchases on behalf of the Foundation. Costco is an exception to this policy as they will not accept the Tax Exemption Certificate.

Club expenses are not tax-exempt. Please pay state sales tax for all Club purchases. These charges will be reimbursed.

Request for Payment and Funds Deposit forms are available from the NWC/F Treasurers, available at each Board Meeting and can be printed directly from the website. There are also fillable PDF versions of the forms on the website. These forms can be downloaded to a member's device. Members can type the appropriate information directly onto the form. Print the form, attach supporting documentation, then submit it to a Committee Chair for approval. Or save the form to your device and scan your supporting documents, then email to your Committee Chair for approval. *Note: A great free app to convert pictures into PDFs that are easily attached to emails is "Genius Scan."*

SUBMISSION LEAD TIME

Timely submission of deposits and requests for payment is imperative to the management of NWC and NWCF. Please follow these procedures to ensure income and expenses are promptly recorded and paid.

Note: Emergency payment requests will be facilitated, if possible, but these should be limited. Additionally, reimbursements for expenses outside the current fiscal year may be declined.

Ideally, coordinate your deposits/payment requests with the monthly board meetings which normally occur on the 2nd Thursday of each month. Since most events also take place at the beginning of each month, timelines should align, allowing you to bring deposits and payments requests to board meetings to secure necessary sign offs.

CATEGORY	SUBMIT TO COMMITTEE CHAIR	COMMITTEE CHAIR SUBMIT TO BUSINESS TREASURER	BUSINESS TREASURER PROCESSING
Checks to be deposited	Within 20 days of Check Date. Note: can bundle multiple checks for dues or events on a single form. Strive for the oldest check written to be within 25 days of the deposit submission.	Review and approve within 7 days of the Deposit Submission Date. Sign, date, and submit to the Business Treasurer within 7 days of your approval.	Deposit checks at the bank within 10 days of receipt from the Committee Chair.
Payment Request for reimbursements	Within 20 days of the expense receipt date. Note, if multiple expenses with different receipt dates, please strive for all expenses to be within 30 days of the oldest receipt date.	Review and approve within 7 days of the Payment Request Date. Sign, date, and submit request to the Business Treasurer within 7 days of your approval.	Write and distribute reimbursement check within 10 days of receipt of the approved payment request.
Payment Request to 3 rd Parties	Payments for 3 rd Parties should be submitted 25 days prior to the vendor's due date.	Review and approve within 7 days Payment Request Date. Sign, date. and submit request to the Business Treasurer within 7 days of your approval.	Write and distribute reimbursement check within 10 days of receipt of the approved payment request

FUNDS DEPOSIT

A Funds Deposit form must be completed for all funds collected for Club or Foundation. The information is the same on both forms. Make sure to use the proper form-**NWCF has a blue border** and **NWC has a yellow border**.

COMPLETION INSTRUCTIONS:

NORTHBROOK WOMAN'S CLUB
P.O. BOX 132, Northbrook, Illinois, 60065

FUNDS DEPOSIT

COMMITTEE NAME: A _____

DEPOSIT SUBMITTED BY: B _____

SUBMISSION DATE: C _____

AUTHORIZED SIGNATURE: D _____

DATE AUTHORIZED: E _____

DEPOSIT SUMMARY

NUMBER OF CHECKS: F _____ at \$ _____ = \$ _____

_____ at \$ _____ = \$ _____

_____ at \$ _____ = \$ _____

_____ at \$ _____ = \$ _____

_____ at \$ _____ = \$ _____

CASH \$ _____ = \$ _____

TOTAL DEPOSIT \$ _____

REVENUE FROM:

Budget Category	Deposit For	Amount
G _____	H _____	\$ I _____
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____

BREAKDOWN:
List checks individually by check number, amount and name or attach a detailed listing from your records.

Check number	Amount	Name/Payer
J _____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

(Please use the back of this form if needed)

DATE RECEIVED: K _____ DATE DEPOSITED: _____

TREASURER'S SIGNATURE: _____

Revision Date: 1/2025

- A. COMMITTEE NAME:** Denotes the committee that has collected the funds.
- B. DEPOSIT SUBMITTED BY:** Indicates person submitting the deposit.
- C. SUBMISSION DATE:** Date submitted by requester.
- D. AUTHORIZED SIGNATURE:** All Funds Deposit forms should be channeled through the Committee Chair to allow the chairperson to track incoming money. The Committee Chair should sign upon review and receipt.
- E. DATE AUTHORIZED:** Date Committee Chair authorized the deposit.
- F. DEPOSIT SUMMARY:** Itemize the deposit into the appropriate column.
- For example: A total deposit of \$4,400 from the Social Committee for funds collected for 110 attendees for a luncheon costing \$40 per person might look like:
- NUMBER OF CHECKS:** 100 at \$40.00 = \$4,000.00
5 at \$80.00 = \$, 400.00
CASH \$ 0 = \$ _____
TOTAL DEPOSIT \$4,400.00
- REVENUE FROM:**
- G. BUDGET CATEGORY:** Select the appropriate income category for your committee.
- H. DEPOSIT FOR:** Detail the reason for the deposit. Be specific in describing the deposit. I.E. Active Member Donation, Holiday Luncheon Tickets, Sustainer Membership Dues, etc.
 Continuing example above:
Social Income -Spring Luncheon - 110 Attendees
- I. AMOUNT:** List the dollar amount for each deposit budget category.
- J. BREAKDOWN:** List each check by the check number, amount, and name/payer. Indicate "See Attached" if providing these details using a separate listing.
- K. DATE RECEIVED, DATE DEPOSITED AND TREASURER'S SIGNATURE:** Completed by the Business Treasurer once the deposit is made at the bank.

REQUEST FOR PAYMENT

A Request for Payment form must be completed for all funds disbursed from the Club or the Foundation. Make sure to use the proper form. **NWCF** has a **blue** border and **NWC** has a **yellow** border.

COMPLETION INSTRUCTIONS:

NORTHBROOK WOMAN'S CLUB FOUNDATION
P.O. BOX 132, Northbrook, Illinois 60065
REQUEST FOR PAYMENT

COMMITTEE NAME: **A** _____

PAYMENT REQUESTED BY: **B** _____

DATE REQUESTED: **C** _____

AUTHORIZED SIGNATURE: **D** _____

DATE APPROVED: **E** _____

TOTAL PAYMENT AMOUNT: \$ **F** _____

Please note: Foundation expenses ARE tax-exempt; state sales tax cannot be reimbursed (except Costco). Always use the Sales Tax Exemption Certificate for Foundation purchases.

EXPENSE DETAILS:

Budget Category G	In Budget Y or N H	Expense For I	Amount \$ J
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____

RECEIPT(S) ATTACHED: **K** YES _____ NO _____

If No, please explain below. If expense involves a contract, please attach a copy of the signed contract and explain any material variance from the contract. If expense not budgeted, attach a copy of your pre-approval email.

CHECK PAYABLE TO NAME: **L** _____

ADDRESS TO SEND CHECK TO: **M** _____

DATE RECEIVED: **N** _____ DATE PAID: _____ CHECK # : _____

Please fill out the form completely, attach receipts, contract copies or an explanation. Payment cannot be made if receipts, contract copies, or explanations are not attached.

Revision Date: 9/2025

- A. COMMITTEE NAME:** Denotes the committee to be charged with the expense. Separate forms must be submitted for different committees.
- B. PAYMENT REQUESTED BY:** Indicates person submitting the payment request.
- C. DATE REQUESTED:** Date submitted by requester.
- D. AUTHORIZED SIGNATURE:** Obtain appropriate signature as defined on the "Who Signs What, When" Form. This form can be found on the website. It is also pictured on the next page.
- E. DATE APPROVED:** Date authorized signer approved.
- F. TOTAL PAYMENT AMOUNT:** Total amount to be paid.

EXPENSE DETAILS:

- G. BUDGET CATEGORY:** Select the appropriate expense category for your committee.
- H. IN BUDGET:** Indicate with a Y for Yes or an N for No if this expense was budgeted. For any expense marked N, a copy of your pre-approval email must be attached to the Request for Payment form. Please note, any expenditure significantly exceeding budget (+20%) should also be explained on the payment form in the lines under the receipts section (K).
- I. EXPENSE FOR:** Detail what was purchased. Be specific in describing the expense. I.E. Ingredients for Salad, Fleece for blankets, Stamps for Secretary, etc.
- J. AMOUNT:** List dollar amount for each individual purchase.
- K. RECEIPT(S) ATTACHED:** YES _____ NO _____ Indicate whether receipts are attached. It should be very rare that this is No. In general, payments will not be reimbursed without receipts; however, explanation lines are provided in the event there is an exception. If the expense involves a contract, attach a copy to the Request for Payment. If the requested payment differs from the contract, use the lines to provide an explanation of the variance. As a reminder, only the President is authorized to sign contracts.
- L. CHECK PAYABLE TO NAME:** List to whom the check should be written.
- M. ADDRESS TO SEND CHECK TO:** Detail where the check should be mailed.
- N. DATE RECEIVED, DATE PAID AND CHECK #:** Completed by the Business Treasurer once payment is made.

WHO SIGNS WHAT, WHEN FORM

Below are the requirements for Club and Foundation to determine who should be signing Funds Deposit and Request for Payment Forms. Please follow these procedures to ensure we are compliant with State and Federal 501(c)3 requirements and our internal audit requirements.



Who Signs What, When...

The requirements are the same for Club and Foundation.

Funds deposit form:	Who Signs	Example
<ul style="list-style-type: none"> If YOU are a Committee Member or Committee Chair submitting a deposit 	Committee Chair	Funds received from social events, raffle tickets, projects proceeds (cookbooks), dues, donations.
<ul style="list-style-type: none"> If YOU are the President submitting a deposit 	Vice Presidents or Reporting Treasurer	Funds for donations.
Request for payment form:	Who Signs	Example
<ul style="list-style-type: none"> If YOU are a Committee Member requesting payment TO yourself 	Board Committee Chair	Personal expenses incurred by the committee member to be reimbursed TO the committee member.
<ul style="list-style-type: none"> If YOU are a Committee Member or sub-committee chair requesting payment TO a third party 	Board Committee Chair	Scholarships/ Grants, Programs, Community Projects
<ul style="list-style-type: none"> If YOU are a Committee Chair requesting payment TO yourself 	Co-Chair (if position exists) or President	Personal expenses relating to the committee, incurred by the chair to be reimbursed TO the chair.
<ul style="list-style-type: none"> If YOU are a Committee Chair requesting payment TO <u>Non-Contracted</u> third party 	Co-Chair (if position exists) or President	Hostess, Social or Community Projects, for non- contracted venues.
<ul style="list-style-type: none"> If YOU are a Committee Chair requesting payment TO a <u>Contracted</u> third party 	YOU (the Board Committee Chair) or President Note: Must include explanation if major billing variance occurs versus the contract	Payment to a contracted third party such as venue, speaker, entertainer, etc. Note: all contracts must be signed by the President & copies attached to payment request.
<ul style="list-style-type: none"> If YOU are the President requesting payment TO yourself or a third party for a non-committee expense 	Vice Presidents or Reporting Treasurer	Gifts, Technology Payments. Note: payment for committee work needs to be signed by Committee Chair.
<ul style="list-style-type: none"> Payment request to move money between Club and Foundation 	Board Committee Chair (typically Treasurers)	Funds transfer between Club and Foundation.

*Note: Requests for a **Non-Budgeted Payments** must be pre-approved by the President or Budget Chair prior to payment submission.*

Revised 1/2025