

Fiscal Year July 1, 2012 through June 30, 2013  
**Region/Chapter Financial Information Form**  
**Group Return Form 990**

Fiscal Year Ending June 30, 2013

Name of Region/Chapter Great Lakes/Greater Columbus Tax/EIN# 23-7148522

CASH BASIS - DO NOT INCLUDE RECEIVABLES AND PAYABLES

Assets, Liabilities & Net Worth	"Beginning of <u>7/1/2012</u>	"End of Year" <u>6/30/2013</u>
<i>Cash:</i>		
Un-deposited Funds	\$160.00	\$160.00
Non-Interest Bearing Accounts	\$18,806.70	\$22,817.29
Interest Bearing Accounts (CD's, Money Market, etc.)		
<b>Total Cash</b>	<b>\$18,966.70</b>	<b>\$22,977.29</b>
<i>Other Assets:</i>		
Furniture & Equipment		
Inventory		
Investments (Stocks and Bonds) (Attach Detail Schedule)		
Other (Please describe) Description: _____		
_____		
_____		
<b>(1) Total Assets:</b>	<b>\$18,966.70</b>	<b>\$22,977.29</b>
<i>Liabilities (Example: Outstanding Loan)</i>		
1. _____		
2. _____		
<b>(2) Total Liabilities:</b>	<b>\$0.00</b>	<b>\$0.00</b>
<b>(3) Net Worth (1 less 2):</b>	<b>y* \$18,966.70</b>	<b>x* \$22,977.29</b>
	(Column 1)	(Column 2)

(\* ) Beginning year amounts must match last years ending numbers.

(3) Net Revenue (line 1 less line 2)\* C = (A - B) \$4,010.59 C

(4) Net Worth (From page 1 line 3)

"End of Year" - X	<u>\$22,977.29</u>	X
"Beginning of Year" - Y	<u>\$18,966.70</u>	Y
Change	<u>\$4,010.59</u>	C

Line 3 - Line 4 = \$0.00 **Must equal \$0.**

\*Net Revenue for the year (line 3 above) must agree with the change in Net Worth in line #4

Prepared By: Kevin Gartrell

Region/Chapter Title: Greater Columbus Chapter/Treasurer

Daytime Phone: 614-466-9382 Fax Number: \_\_\_\_\_

E-mail: Kevin.G.1@bwc.state.oh.us

Signature: *Kevin Gartrell*

Date: 08/01/2013

20. Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:

Yes

A. The governing body?

Yes

B. Each committee with authority to act on behalf of the governing body?

Yes

21. Was a copy of the Form 990 provided to the organization's governing body before it was filed?

Yes

A. Describe the process, if any, the organization uses to review the Form 990.

22. Does the organization have a written conflict of interest policy?

No

If yes:

A. Are officers, directors or trustees, and key employees required to disclose annually interest that could give rise to conflicts?

N/A

B. Does the organization regularly and consistently monitor and enforce compliance with the policy? If yes, how is this done?

N/A

23. Does the organization have a written whistleblower policy?

No

24. Does the organization have a written document retention and destruction policy?

No

25. Did the process for determining compensation of the officer or key employees of the organization include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? If yes, describe the process.

No

Fiscal Year July 1, 2012 through June 30, 2013

**GROUP RETURN AUTHORIZATION**

The Great Lakes / Greater Columbus Region/Chapter Representative of Association of Records Managers and Administrators, Inc. authorizes the Association of Records Managers and Administrators, Inc. (ARMA HQ) to include this Region/Chapter in the group information return, FORM 990, if eligible for such inclusion.

Under penalty of perjury, I declare that this authorization and the information submitted to be included in the group return are, to the best of my knowledge and belief, true, correct, and complete.

Title: President

Name: Martin D. Suser

Address: 3211 Tolleross Dr.  
Hilliard, OH 43026

Signature: Martin D. Suser

Date: 8/1/13