



ZONTA
INTERNATIONAL
DISTRICT 4
EMPOWERING WOMEN
THROUGH SERVICE & ADVOCACY

Spring Workshop

Treasurer 101

Submitting Dues

Accessing Website



THE ROLE AND RESPONSIBILITIES OF THE TREASURER

The club treasurer is responsible for ensuring that the club is continuously in good standing and proper financial management.

A club treasurer:

- Prepares and presents at the annual meeting both a financial report and the annual (or biennial) budget.
- Ensures that authorized signatures are on file with the club's bank(s).
- Administers club funds in accordance with the approved budget.
- Pays all properly approved bills in accordance with the approved budget.
- Keeps an accurate record of the collection and disbursement of all club monies.
- Submits financial reports to the club and its board as required.
- Produces bank statements and checkbooks at annual meeting or when requested by club members.
- Submits a written report of the club's annual financial position at the annual meeting.
- Ensures the membership list at Headquarters is up to date and that international membership dues are paid by 1 June.
- Registers new members as soon as they join Zonta and have paid the dues.
- Pays district dues, and area dues if applicable, by the date required.
- Ensures prompt transfer of donations/contributions to the Zonta International Foundation, and that payment is made to the correct account (which differs from club dues payments).
- Reports to the club president/board as required.
- Creates and administers a policy for record retention in keeping with the country's filing requirements. (In the US, the IRS mandates seven years.)
- Determines and follows all state, provincial, and country filing requirements.
- Arranges the audit/examination and reviews and provides to the club a written report from the auditors/examiners.
- Briefs the incoming treasurer on all club activities and policies and hands over all club records of office to the incoming treasurer within 45 days after the new treasurer assumes office.



Zonta International
 1211 West 22nd Street, Suite 900
 Oak Brook, IL 60523 USA
 Telephone: (630) 928-1400
 Fax: (630) 928-1559
 Email: memberrecords@zonta.org

MEMBER REPORT FORM B

[Changes to Club Membership]

STATUS CODES

1. New Member
2. Reinstated Member
3. Club Honorary Member
4. Club Transfer (to/from)
5. Change of Name/ Address
6. Resignation/Termination
7. Deceased
8. All Other Changes

If a new member has joined your club and they are a previous Z/Golden Z member or award recipient, please complete page 3 of this form.

After comparing the FORM A you have received containing the HQ membership list with your own list, please use the table below to make corrections or additions.

The classification codes can be found at:

<http://www.zonta.org/ClubsLeadership/Tools/MembershipTools.aspx>

Submitted by:

Zonta Club of:		District:		Area:		Club #:	
Name:				Country:			
Address:			City:		Postal code:		
Phone number: <small>(include country code)</small>			Fax: <small>(include country code)</small>		e-mail:		

Status Code	Personal Information	Mailing Address	Telephone, Fax & Email (Include Country/Area/City Code)
	LAST NAME/SURNAME:	ADDRESS:	BUSINESS: <small>(Please include country code)</small>
	FIRST NAME/GIVEN NAME:	CITY:	HOME: <small>(Please include country code)</small>
	DATE OF BIRTH (MM/DD/YYYY):	STATE/PROVINCE & POSTAL CODE:	FAX: <small>(Please include country code)</small>
	CLASSIFICATION CODE: 4-digit only:	COUNTRY:	MOBILE/CELL: <small>(Please include country code)</small>
	OCCUPATION DESCRIPTION:	Gender: <input type="checkbox"/> FEMALE <input type="checkbox"/> MALE	EMAIL :
	LAST NAME/SURNAME:	ADDRESS:	BUSINESS: <small>(Please include country code)</small>
	FIRST NAME/GIVEN NAME:	CITY:	HOME: <small>(Please include country code)</small>
	DATE OF BIRTH (MM/DD/YYYY):	STATE/PROVINCE & POSTAL CODE:	FAX: <small>(Please include country code)</small>
	CLASSIFICATION CODE: 4-digit only:	COUNTRY:	MOBILE/CELL: <small>(Please include country code)</small>
	OCCUPATION DESCRIPTION:	Gender: <input type="checkbox"/> FEMALE <input type="checkbox"/> MALE	EMAIL :

Status Code	Personal Information	Mailing Address	Telephone, Fax & Email (Include Country/Area/City Code)
	LAST NAME/SURNAME:	ADDRESS:	BUSINESS: (Please include country code)
	FIRST NAME/GIVEN NAME:	CITY:	HOME: (Please include country code)
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	CLASSIFICATION CODE: 4-digit only:	COUNTRY:	MOBILE/CELL: (Please include country code)
	OCCUPATION DESCRIPTION:	Gender: <input type="checkbox"/> FEMALE <input type="checkbox"/> MALE	EMAIL :
	LAST NAME/SURNAME:	ADDRESS:	BUSINESS: (Please include country code)
	FIRST NAME/GIVEN NAME:	CITY:	HOME: (Please include country code)
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	FIRST NAME/GIVEN NAME:	CITY:	HOME: (Please include country code)
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	CLASSIFICATION CODE: 4-digit only:	COUNTRY:	MOBILE/CELL: (Please include country code)
	OCCUPATION DESCRIPTION:	Gender: <input type="checkbox"/> FEMALE <input type="checkbox"/> MALE	EMAIL :



Please fill out and submit this form via email to memberrecords@zonta.org if your new member is a previous (please mark):

- Amelia Earhart Fellow Year(s) of Fellowship: _____
- Jane M. Klausman Scholarship Recipient District International Year of Scholarship: _____
- Young Women in Public Affairs Award Recipient District International Year of Award: _____
- Z or Golden Z Club Member Year(s) of Emma L. Conlon Award: _____

Last Name of the new member:	
First Name of the new member:	

Zonta Club of:		District:		Area:		Club #:	
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Submitted by:	
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For Zonta Headquarters use only

- Check Raiser's Edge database for previous recipient before processing
- Process award recipient by checking off award box in iMIS
- Send a copy of this form to Director of Programs and Advocacy



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 1211 West 22nd Street, Suite 900
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FORM B FOR CHARTER CLUBS

SOM Chairman Sign/Date

STATUS CODES

1. New Member
2. Reinstated Member
3. Club Honorary Member
4. Club Transfer (to/from)
5. Change of Name/ Address
6. Resignation/Termination
7. Deceased
8. All Other Changes

If a new member has joined your club and they are a previous Z/Golden Z member or award recipient, please complete page 9 of this form.

Enter the information for each of your charter members below.
 The classification codes can be found at:
<http://www.zonta.org/ClubsLeadership/Tools/MembershipTools.aspx>

Submitted by:

Zonta Club of:		District:		Area:		Club #:	
Name:				Country:			
Address:			City:			Postal code:	
Phone number: <small>(include country code)</small>			Fax: <small>(include country code)</small>			e-mail:	

Status Code	Personal Information	Mailing Address	Telephone, Fax & Email <small>(Include Country/Area/City Code)</small>
	LAST NAME/SURNAME:	ADDRESS:	BUSINESS: <small>(Please include country code)</small>
	FIRST NAME/GIVEN NAME:	CITY:	HOME: <small>(Please include country code)</small>
	DATE OF BIRTH (MM/DD/YYYY):	STATE/PROVINCE & POSTAL CODE:	FAX: <small>(Please include country code)</small>
	CLASSIFICATION CODE: 4-digit only:	COUNTRY:	MOBILE/CELL: <small>(Please include country code)</small>
	OCCUPATION DESCRIPTION:	Gender: <input type="checkbox"/> FEMALE <input type="checkbox"/> MALE	EMAIL :
	LAST NAME/SURNAME:	ADDRESS:	BUSINESS: <small>(Please include country code)</small>
	FIRST NAME/GIVEN NAME:	CITY:	HOME: <small>(Please include country code)</small>
	DATE OF BIRTH (MM/DD/YYYY):	STATE/PROVINCE & POSTAL CODE:	FAX: <small>(Please include country code)</small>
	CLASSIFICATION CODE: 4-digit only:	COUNTRY:	MOBILE/CELL: <small>(Please include country code)</small>
	OCCUPATION DESCRIPTION:	Gender: <input type="checkbox"/> FEMALE <input type="checkbox"/> MALE	EMAIL :

Status Code	Personal Information	Mailing Address	Telephone, Fax & Email (Include Country/Area/City Code)
	LAST NAME/SURNAME:	ADDRESS:	BUSINESS: (Please include country code)
	FIRST NAME/GIVEN NAME:	CITY:	HOME: (Please include country code)
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	OCCUPATION DESCRIPTION:	Gender: <input type="checkbox"/> FEMALE <input type="checkbox"/> MALE	EMAIL :
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	DATE OF BIRTH (MM/DD/YYYY):	STATE/PROVINCE & POSTAL CODE:	FAX: (Please include country code)
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Status Code	Personal Information	Mailing Address	Telephone, Fax & Email (Include Country/Area/City Code)
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Status Code	Personal Information	Mailing Address	Telephone, Fax & Email (Include Country/Area/City Code)
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	OCCUPATION DESCRIPTION:	Gender: <input type="checkbox"/> FEMALE <input type="checkbox"/> MALE	EMAIL :
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	FIRST NAME/GIVEN NAME:	CITY:	HOME: (Please include country code)
	DATE OF BIRTH (MM/DD/YYYY):	STATE/PROVINCE & POSTAL CODE:	FAX: (Please include country code)
	CLASSIFICATION CODE: 4-digit only:	COUNTRY:	MOBILE/CELL: (Please include country code)
	OCCUPATION DESCRIPTION:	Gender: <input type="checkbox"/> FEMALE <input type="checkbox"/> MALE	EMAIL :



Please fill out and submit this form via email to memberrecords@zonta.org if your new member is a previous (please mark):

- Amelia Earhart Fellow Year(s) of Fellowship: _____
- Jane M. Klausman Scholarship Recipient District International Year of Scholarship: _____
- Young Women in Public Affairs Award Recipient District International Year of Award: _____
- Z or Golden Z Club Member Year(s) of Emma L. Conlon Award: _____

Last Name of the new member:	
First Name of the new member:	

Zonta Club of:		District:		Area:		Club #:	
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Submitted by:	
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For Zonta Headquarters use only

- Check Raiser's Edge database for previous recipient before processing
- Process award recipient by checking off award box in iMIS
- Send a copy of this form to Director of Programs and Advocacy

International Dues Payment Transmittal Form for the Period of 1 December 2016 - 31 May 2017

Zonta Club of: _____ Date: _____

District: _____ Area: _____ Club Number: _____

Name of Remitter: _____ Position/Title: _____

Form of Payment: *(Please check applicable box)*

Check/Cheque/Money Order

International Wire Payment

Allocation of Payment – INTERNATIONAL DUES ONLY
Membership Dues & Fees

MEMBER DUES RENEWAL	Dues/Fees	Number of Members	Total Amount in US\$
MEMBER RENEWAL TOTAL (Includes \$3.00 club liability insurance)	US\$ 83.00	_____	_____
NEW MEMBER HALF-YEAR NEW MEMBER TOTAL (Includes \$3.00 club liability insurance and \$15.00 new member fee)	US\$ 58.00	_____	_____
REINSTATED MEMBER HALF-YEAR REINSTATED MEMBER TOTAL (Includes \$3.00 club liability insurance and \$15.00 reinstatement fee)	US\$ 58.00	_____	_____
TOTAL NUMBER OF MEMBERS		_____	_____
		# of Clubs Sponsored	
Z Club/Golden Z Club Renewal Fees US\$ 5.00 per club		_____	_____
		Extra Copies	
The Zontian Additional Subscription ** US\$ 7.00 per copy		_____	_____
TOTAL PAYMENT	US\$	_____	

PLEASE SEE NEXT PAGE

PAYMENT BY CHECK/CHEQUE/MONEY ORDER:

SEND CHECK/CHEQUE/MONEY ORDER PAYMENTS TO ZONTA INTERNATIONAL'S MAILBOX ADDRESS.

ZONTA INTERNATIONAL
1919 PAYSPHERE CIRCLE
CHICAGO IL 60674
USA

WIRE PAYMENTS (Bank of America, Chicago, IL)

USE EITHER:

1.) ABA # 0260-0959-3, Account # 5800248873

OR

2.) SWIFT CODE: BOFAUS3N, Account # 5800248873

Please make sure that your payment includes bank transfer fees in any.

CHECK LIST:

Before you submit your club's dues payment, please ensure the following:

- Form A has been reviewed for any membership/profile changes
- If changes are needed, membership changes have been completed on Form B
- Number of renewing/new/reinstated members are reflected on Form C
- Club's dues payment matches renewing/new/reinstated numbers on Form C
- Payment is made in USD, drawn on a US bank account, including bank transfer fees if any
- Funds have been made payable to Zonta International
- Dues payment is sent to either Zonta International's mailbox address or has been wired using the information on the second page of Form C, including bank transfer fees
- Form B is submitted
- Form C is submitted



ZONTA
INTERNATIONAL
DISTRICT 4
EMPOWERING WOMEN
THROUGH SERVICE & ADVOCACY

DUES TRANSMITTAL FORM

For the period of June 1, 2016 to May 31, 2017

Due by June 1, 2016

Zonta Club of: _____

Date: _____

Treasurer's Name: _____

Address: _____

E-mail Address: _____

Phone: _____

		Number of Members	Total Amount US \$
Full Year Dues (June – Nov)	US \$ 12		
Conference Assessment	<u>US \$ 3</u>		
Total	<u>US \$ 15</u>	_____	_____
Half Year Dues (Dec – May)	US \$ 6		
Conference Assessment	<u>US \$ 3</u>		
Total	<u>US \$ 9</u>	_____	_____

Please submit cheque or money order in
US Dollars payable to:

ZONTA INTERNATIONAL DISTRICT 4

Mail payment to:

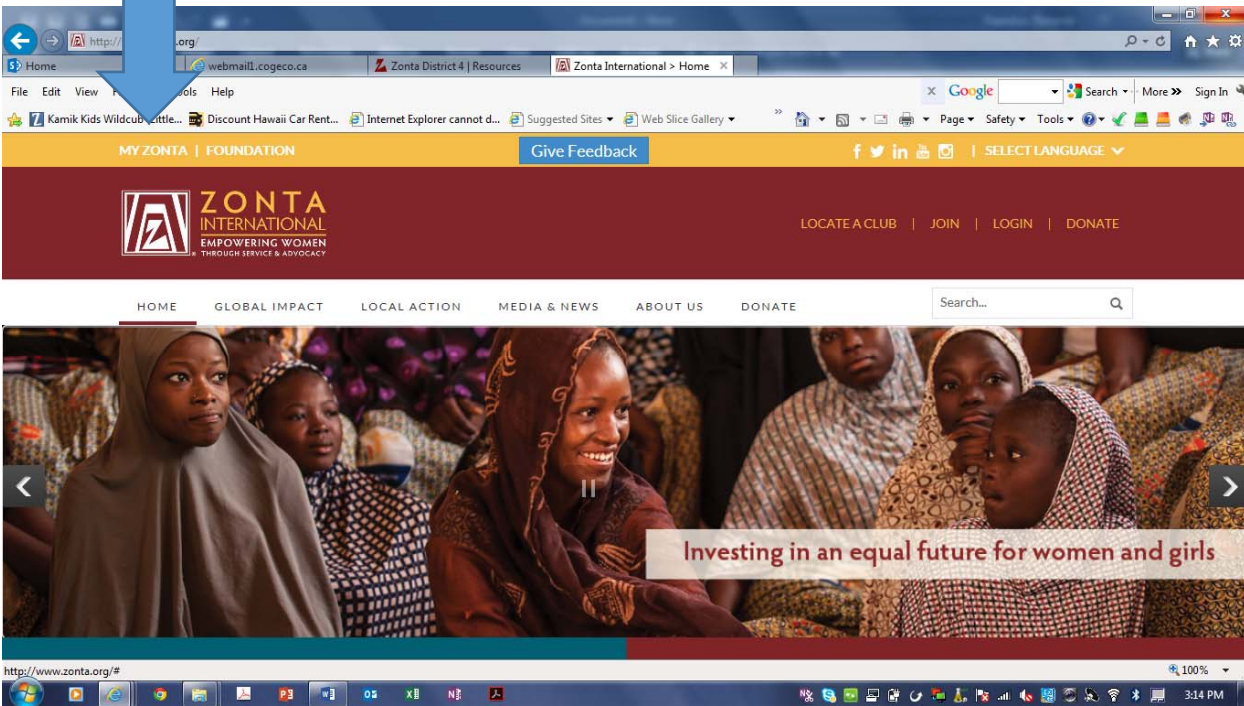
Roxanne Rapedius, Treasurer
7 Mareve Ave
Hamilton, ON L8H 7A7 Canada

Questions? Contact Roxanne Rapedius at the above address **or** email roxy49@cogeco.ca **or** call (289) 396-3465.

Thank you.

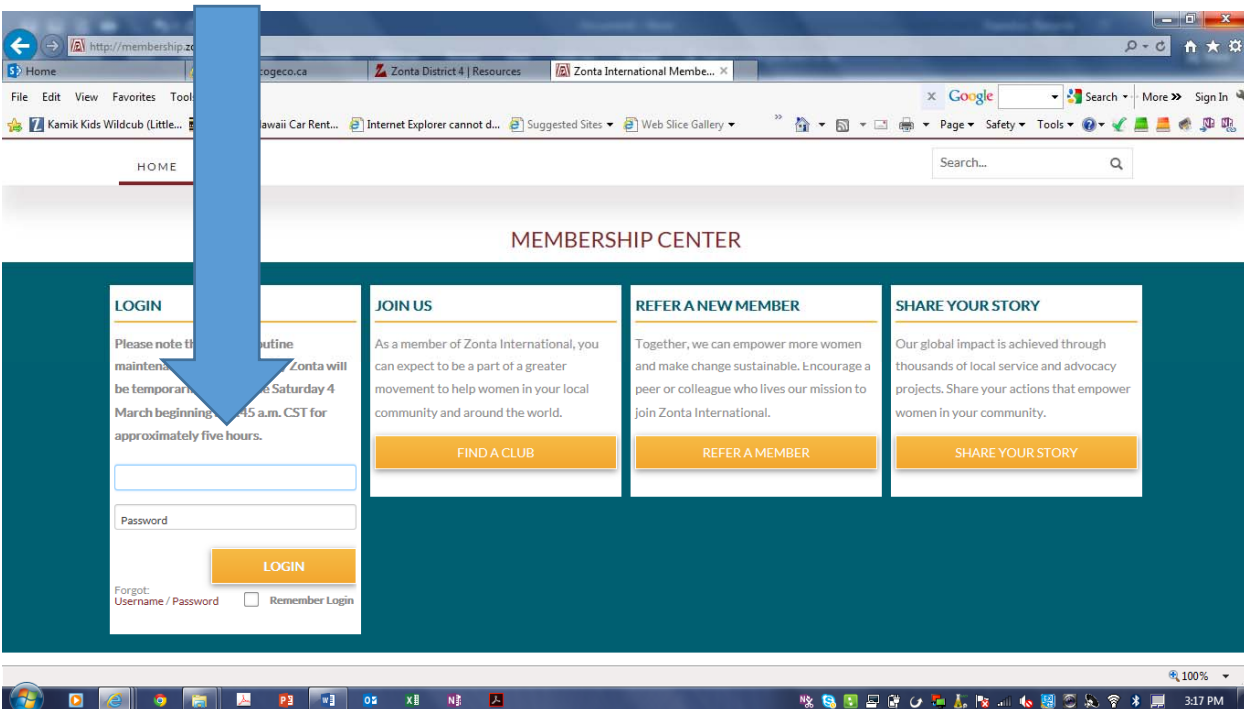
Accessing Zonta Website – Member Area

Press to access member area



Insert your Login ID and Password and press Login.

(If you do not have access to the member area, please Email webmaster@zonta.org for assistance by providing your member #, club name and number and district #.





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Roxanne Rapedius
CANADA
Club Name: OAKVILLE

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