



Special Olympics

Alaska

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FINANCES



Special Olympics Alaska, Inc.
Centralized Accounting

Special Olympics Inc. General Rules, outlines accreditation requirements to insure that only those organizations properly managed and financed are given the rights to (a) hold themselves out to the public as Special Olympics organizations or Programs; (b) raise, receive or spend funds in the name of Special Olympics; or (c) use, or authorize others to use the name Special Olympics or any other Special Olympics trademarks in conducting their programs or activities.

In accordance with Special Olympics Inc. the Special Olympics Alaska Board of Directors adopted a centralized accounting system to insure compliance with accounting standards. Special Olympics Alaska is responsible for all financial and banking transactions. Only accredited community Sub-Programs may have a bank account, which will meet all of the Special Olympics Alaska financial procedures and centralized accounting standards.

Each accredited community Sub-Program must have at least a Community Director and a finance person to comply with the financial standards of Special Olympics Alaska. The Community Director approves all invoices in conjunction with the local finance person. Each accredited community expenses are paid through the centralized accounting system in which all community finances can be tracked for reporting purposes. All checks, invoices and deposits are retained for yearly audit. No personal monies shall be used for Special Olympics Alaska without prior approval from the President/CEO along with any facsimile or email requests.

Centralized Accounting:

Petty Cash: (See Petty Cash Reimbursement Form)

Each accredited Community Sub-Program may have up to \$300.00 in a petty cash account. Community Petty Cash checks require two signatures and only Special Olympics Alaska has the authorization to transfer or deposit to reimburse these funds. Petty Cash is not to be used for operational purposes but rather when unexpected budget items are needed.

Community Check Request: (See Community Check Request Form)

Each accredited community Sub-Program must submit a check request with original invoice for payment. Payments will be made within 14-21 days after processed by Special Olympics Alaska.

Revenue Submittal Form: (See Revenue Submittal Form)

Each accredited community Sub-Program must submit a revenue submittal form and attach copies of deposited checks & receipts to it.



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STATE OFFICE USE ONLY

Date received: _____

Date processed: _____

Approved By President/CEO

Petty Cash Reimbursement

1. Two Signatures are required on all petty cash checks
2. Fill out this form completely for this request to be processed.
3. Petty Cash account limit is \$300.00.
4. Attach all original receipts.
5. Mail to Accountant, Special Olympics Alaska, Inc. 3200 Mountain View Dr. Anchorage, Alaska 99501.
6. If needed in less then 14 days call the Community Relations Manger and fax to 907-222-6200 or scan this form and receipts or bills. Originals still need to be mailed.
7. For all related financial information contact Community Relations Manager at 1-888-499-7625.

THIS REQUEST WILL BE PROCESSED WITHIN 14-21 DAYS

Date: _____ Bank Account to be charged: (check one) _____ COMMUNITY _____ GAMING

Community Name and Number: _____

Prepared by: _____ Position _____

The ending balance is the amount you should have in your possession before reimbursement. Petty cash will be replenished as long as all original receipts and reports are turned in. The State office will not replenish petty cash accounts automatically when a bank statement is received.

	DATE	AMOUNT
Beginning Balance:	_____	_____
Ending Balance:	_____	_____
Reimbursement request:		_____
Reimbursement Expense Detail		

Check #	Date	Vendor/Name	Amount	Expense Account to charge	Memo	Budget Yes / No



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Community Check Request

STATE OFFICE USE ONLY

Date received: _____

Date processed: _____

Approved by President/CEO

1. Fill out this form completely for this request to be processed.
2. Attach the original receipt(s) or bill(s) for this request to be accepted and processed.
3. Mail to Accountant, Special Olympics Alaska, Inc. 3200 Mountain View Dr. Anchorage, Alaska, 99501.
4. If needed in less than 14 days call the Community Relations Manger and fax to 907-222-6200 or scan this form and receipts or bills. Originals still need to be mailed.
5. For all related financial information contact Community Relations Manager at 1-888-499-7625.

CHECKS WILL BE PROCESSED WITHIN 14 – 21 DAYS

Date _____ Bank Account to be charged: please check _____ COMMUNITY _____ GAMING

Community Name and Number: _____ Prepared by: _____

Position _____ Telephone (day) _____

CHECK REQUEST:

Vendor: _____ Address: _____

City, State, Zip: _____

Telephone: _____

Amount: _____ Purpose: _____

Budget Item: ___ Yes or ___ No (please check) (if no) please explain in writing: _____

Amount	Expense Account to charge	Memo



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Revenue Submittal Form

(One per bank deposit)

Date received: _____

Date processed: _____

Approved by President/CEO

1. Fill out this form completely for this request to be processed.
2. Attach copies of deposited checks/cash receipts.
3. Once deposit is made please attach original bank receipt.
4. Send to Accountant, Special Olympics Alaska, Inc. 3200 Mountain View Dr. Anchorage, Alaska 99501.
5. For all related financial information contact Community Relations Manager at 1-888-499-7625.

THIS REQUEST WILL BE PROCESSED WITHIN 14-21 DAYS

Date: _____ Bank Account For Deposit: (check one) COMMUNITY GAMING

Community Name and Number: _____

Report Prepared by: _____ position: _____

Telephone (day) _____

REVENUES: Report cash as well as in-kind donations. All donations (including the value of in-kind goods) must be forwarded to the Program office with this report.

Date (from checks)	Revenue Account to credit	Donor/Name	Memo	Amount (\$)	In-kind Value (if applicable)

DEPOSIT TOTAL

Special Olympics Alaska, Inc.
Account Listing
1/5/2011

404	Gaming Revenue
410	Grants and Foundations
416	Comb Fed Campign/United Way
419	Corporate Sponsorships
440	Uniform Sales
445	Fund Raising Event
450	General Donation
451	Donations - In Memory of
460	Auction
467	Torch Run Revenue
471	Sponsor an Athlete
475	Misc.
505	Advertising (<i>Ads, promotions, pubic awareness</i>)
506	Awards
507	Auto Rental/Expenses (<i>ground transporation</i>)
508	Lodging
510	Travel Expenses (<i>airline tickets</i>)
511	Seminars/Conferences
513	Office Supplies & Expenses (<i>paper, ink, etc</i>)
514	Printing Expenses (<i>business cards thank you cards</i>)
516	Telephone
518	Equipment Purchases
520	Postage - Routine
523	Registration Fees Expense
524	Equipment Lease
525	Dues (<i>membership ie chamber of commerce</i>)
526	Miscellaneous Expense
528	Permits/Licenses
529	Merchandise
536	Winnings Paid
539	Food
540	Gaming
542	Rental Facilities
554	Recognition
567	Training Expense
568	Athlete Uniform Expense

Special Olympics Alaska, Inc.
Community Codes
January 1, 2011

10	Anchorage
11	Ketchikan
12	Homer
13	Valdez
14	Central Peninsula
15	Mat Su
16	Sitka
17	Seward
18	Tanana Valley
19	Kodiak
20	Prince of Wales
21	Nome
22	Juneau
23	Dillingham
24	Bethel
25	Barrow