

AMERICAN FEDERATION OF STATE, COUNTY AND MUNICIPAL EMPLOYEES 2018 SURETY BOND REPORT

Section I. CASH (Cash, savings, dues trust, health & welfare and other bank accounts. List CD's in Section II).

<u>Bank</u>	<u>Account Type</u>	<u>Account #</u>	<u>Balance as of 12/31/18</u>
_____	_____	_____	\$ _____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
Section I Total			\$ _____

Section II. INVESTMENTS (CD's, Money Market and other monetary instruments. Do not include real estate).

<u>Name</u>	<u>Account Type</u>	<u>Account # or Serial #</u>	<u>Balance as of 12/31/18</u>
_____	_____	_____	\$ _____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
Section II Total			\$ _____

Section III. RECEIPTS

2018 Dues Received (only record amount handled by affiliate- see instructions)	\$ _____
2019 Dues Adjustment (leave blank unless significant increase in Dues Received in 2019 is expected- see instructions)	_____
Other 2018 Receipts (Specify below, e.g. insurance premiums, fundraisers, interest, initiation fees, etc.)	
_____	_____
_____	_____
_____	_____
Section III Total	
	\$ _____

GRAND TOTAL (Sum of the Sections I, II, and III Totals) \$ _____

For Councils and Locals Only (see instructions):

Does the union have any Private Sector Employers? YES ___ NO ___
 If YES to the above, did the union file a Department of Labor Form LM last year? YES ___ NO ___

Prepared by: _____ State _____
 Title: _____ Enter Affiliate # as applicable:
 Personal Email: _____ Council _____
 Cell Phone*: _____ Local _____
 Affiliate Employer Identification Number (EIN): _____ Ret Chapter _____
 Signature: _____ Ret Subchapter _____

*By providing your cell phone number you consent to receive calls (including recorded or autodialed calls, or texts) at that number from AFSCME and its affiliated labor, political, and charitable organizations on any subject matter. Your carrier's rates may apply. You may modify your preferences at <https://www.afscme.org/tcpa>

GENERAL INSTRUCTIONS FOR COMPLETING SURETY BOND REPORT

The purpose of this report is to estimate the amount of funds that will be available to or “handled” by the affiliate during 2019. As a rule of thumb, this amount comprises cash and investments on hand at 12/31/18 plus an estimate of 2019’s receipts using the actual 2018 receipts. The estimated amount of funds handled will determine if an increase to the affiliate’s Surety Bond Coverage is necessary. Please include all financial activities and balances of the affiliate.

FAILURE TO FILE THIS REPORT MAY RESULT IN INSUFFICIENT BOND COVERAGE.

Section I.

Record the cash balances using the reconciled balances as of December 31, 2018. Show the account numbers of all bank accounts.

If the affiliate has more than four (4) accounts, attach or email a separate list with the requested information for all of the accounts and the total. Indicate “Total- See Attached Detail” under the “Bank” column on the first line, provide the total on the same line under the “Balance as of 12/31/18” column, and carry the amount to the Section I Total.

Section II.

Record the balances as of December 31, 2018 on all certificates of deposit, money market accounts, and the market value of stocks, bonds, and other securities. Do not include real estate. Indicate the name of the financial institution in the space provided.

If the affiliate has more than four (4) investment line items, attach or email a separate list with the requested information for all of the line items and the total. Indicate “Total- See Attached Detail” under the “Name” column on the first line, provide the total on the same line under the “Balance as of 12/31/18” column, and carry the amount to the Section II Total.

Section III.

For the “2018 Dues Received” line item, dues and other receipts should be recorded using the actual amounts received (i.e. “handled”) by the affiliate during 2018. For example, Locals receiving a rebate of dues from a Council after the Council deducts other portions of the total dues should only record the Local’s rebate that is received.

The “2019 Dues Adjustment” line item is used to increase the 2019 estimate if using the 2018 Dues Received as a 2019 estimate would otherwise be insufficient. If for example there is a significant membership increase expected in 2019, an amount should be placed here that in total when added to the “2018 Dues Received” line item above will be an estimate of 2019 Dues receipts. Similarly, if the affiliate was only in operation for a portion of the year 2018 an additional amount should be included here that in total when added to the actual 2018 amount is an estimate of 2019.

Other 2018 non-dues related receipts should be also included in this section by category. Add all line items in Section III and indicate the sum in the Section III Total.

Grand Total

After completing all three sections, add the totals in Sections I, II, and III and record on the “Grand Total” line.

For Councils and Locals Only

Check the boxes as applicable. Private sector employers refer to any employer that is not a state, county, municipality, or agency thereof.

Lower Section

Please be sure that all of the requested information has been completed and that the report is signed by an officer. Affiliates completing this form electronically should type the signatory officer’s name in the signature line. The officer’s name will be treated as an electronic signature.

How to send

Electronic filings- email to suretybond@afscme.org and attach the completed report.

Paper filings: AFSCME- Attn: Auditing Department
1625 L Street NW
Washington, DC 20036-5687

Additional item to include

Attach a copy of the most recent financial statement presented to your executive board and/or membership. Electronic filings should include this item as an additional attachment to the email.

Due Date: FORWARD TO THE INTERNATIONAL HEADQUARTERS NO LATER THAN MARCH 1, 2019.