

South Dakota Towns and Townships Bond Alliance

2011

APPLICATION FOR PUBLIC OFFICIAL BOND – FINANCE OFFICER

1. Town Name _____ 2. County _____
3. Name of Applicant _____ Email _____
- Residence Address _____ City _____ State _____ Zip _____
4. Position: _____ 5. To Whom Bond is Given _____
6. Amount of Bond _____
7. Applicant's Official Title: _____ Elected or Appointed (Circle one)
8. Are any other Bonds furnished by you in connection with this or any other official position?
_____ Yes _____ No
9. If so, state the position, the amounts of Bonds and Names of Sureties:

10. Have you ever been bonded before? _____ Yes _____ No
11. Have you ever been denied a Bond? _____ Yes _____ No
12. If you have been denied a Bond, explain: _____
13. Have you ever been convicted of a felony? _____ Yes _____ No If yes, describe: _____

14. Duties of your office – State fully _____

15. Money Handled during year (Approximate): Amount: \$ _____
16. Largest Amount on Hand at any time: \$ _____ Period of Largest Amount: _____
17. To whom are receipts turned over _____ How Often? _____
18. Periods of Largest Receipts _____
19. Depository Banks _____ Limit of Deposit, if any _____

20. Depositories designated by (attach copies of Resolutions) _____

21. Deposits in Name of _____
22. Will interest on deposit be paid to Applicant – Personally? _____ Yes _____ No
23. Are funds withdrawn by check of Applicant? _____ Yes _____ No

24. Are counter signatures required? ____ Yes ____ No If yes, are all checks properly countersigned?

____ Yes ____ No

25. Are funds paid on Warrants? ____ Yes ____ No

26. Do Warrants become part of check or draft? ____ Yes ____ No

27. Securities in Custody of Applicant: \$ _____ Where Deposited: _____

28. What Joint Control? _____

29. Accounts Audited by: _____ How Often? _____

30. Date of Last Audit: _____ Is Audit required by law? ____ Yes ____ No

31. What taxes collected _____

32. Approximate Amount Collected: _____ When collected?

33. Extent of liability for uncollected taxes:

34. How relieved from Liability:

35. Date of Annual Settlement: _____ With Whom? _____

36. Tax Liens filed - When? _____

37. Do you continue to collect delinquent taxes and how long?

Signature _____ Date _____

Office use Date Received _____