



Certified Quilt Business Financial Responsibility Form

The Quilts of Valor® Foundation is a 501(c)(3) not for profit foundation.

I, _____ represent _____ located at _____.

As a QOVF Certified Quilt Business, I agree to adhere to the Quilts of Valor Foundation® Policies & Procedures, accessible at www.QOVF.org. <https://www.qovf.org/policies-and-procedures-3/>

I understand my responsibilities include:

- Serving as the financial contact person for this quilt business
- Reporting and submitting all financial donations to the Foundation's Treasurer
- Submitting reimbursement requests to the Foundation's Treasurer. Examples of reimbursable expenses are stated in Procedures.
- Keeping on file monthly or periodic reports from the Foundation's Treasurer
- Acknowledging local donations.

I understand that funds raised in the name of Quilts of Valor® Foundation are, by law, the property of the Foundation.

Signature: _____

Printed Name: _____

Date: _____

Scan the completed form and email to FinancialForm@govf.org OR Mail the completed form to

**Quilts of Valor Foundation
P.O. Box 191
Winterset, IA 50273**