

OXFORD HOUSES OF VIRGINIA CHAPTER MEETING MINUTES

| | | |
|-----------------------|--|-------------------------|
| Chapter Number | Chapter Meeting Date & Time | Meeting Location |
|-----------------------|--|-------------------------|

| | | |
|---|---|---|
| House Name: Member's Name: <input type="checkbox"/> President <input type="checkbox"/> Other Approved by House to vote? # of House Members Present: | House Name: Member's Name: <input type="checkbox"/> President <input type="checkbox"/> Other Approved by House to vote? # of House Members Present: | House Name: Member's Name: <input type="checkbox"/> President <input type="checkbox"/> Other Approved by House to vote? # of House Members Present: |
| House Name: Member's Name: <input type="checkbox"/> President <input type="checkbox"/> Other Approved by House to vote? # of House Members Present: | House Name: Member's Name: <input type="checkbox"/> President <input type="checkbox"/> Other Approved by House to vote? # of House Members Present: | House Name: Member's Name: <input type="checkbox"/> President <input type="checkbox"/> Other Approved by House to vote? # of House Members Present: |
| House Name: Member's Name: <input type="checkbox"/> President <input type="checkbox"/> Other Approved by House to vote? # of House Members Present: | House Name: Member's Name: <input type="checkbox"/> President <input type="checkbox"/> Other Approved by House to vote? # of House Members Present: | House Name: Member's Name: <input type="checkbox"/> President <input type="checkbox"/> Other Approved by House to vote? # of House Members Present: |
| House Name: Member's Name: <input type="checkbox"/> President <input type="checkbox"/> Other Approved by House to vote? # of House Members Present: | House Name: Member's Name: <input type="checkbox"/> President <input type="checkbox"/> Other Approved by House to vote? # of House Members Present: | House Name: Member's Name: <input type="checkbox"/> President <input type="checkbox"/> Other Approved by House to vote? # of House Members Present: |
| House Name: Member's Name: <input type="checkbox"/> President <input type="checkbox"/> Other Approved by House to vote? # of House Members Present: | Guests: | Guests: |

Secretary's Report: Read the Minutes from the prior Chapter Meeting and record the action taken.

Approved as read.

Approved with the following changes:

Principle Read

Tradition Read

Treasurer's Report: The Treasurer collects House checks for dues, fines, etc. The Chapter Treasurer presents the Treasurer's Report for the prior completed month. Record the following items and the following action is taken. Attach a copy of the Treasurer's Report to the Minutes.

| | |
|--------------------|----|
| Beginning Balance: | \$ |
| Funds Received: | \$ |
| Funds Paid Out: | \$ |
| Ending Balance: | \$ |

Approved as read/distributed

Approved with following changes:

Was a copy of the Treasurer's Report provided to each House? Yes No

Was a Chapter Audit Performed? Yes No When?

Bills approved to be paid at current meeting:

Officer Reports:

Chairperson's Report: Attach written copy if submitted.

Vice-Chairperson's Report: Attach written copy if submitted.

Housing Service Committee Chairperson's Report: Attach written copy if submitted.

Other Reports: Attach written copy if submitted.

House Reports: Houses present Monthly House Financial Summary Report (submit to Chapter Treasurer w/ copy of bank statement) and Monthly House Report (submit to Chapter Housing Service Committee Chairperson)

| MONTHLY HOUSE FINANCIAL SUMMARY REPORT INFO | | | | | | | |
|---|----|----|----|----|----|----|----|
| HOUSE NAME | | | | | | | |
| NUMBER OF BEDS | | | | | | | |
| Beginning Balance | \$ | \$ | \$ | \$ | \$ | \$ | \$ |
| Total Deposits | \$ | \$ | \$ | \$ | \$ | \$ | \$ |
| Total Expenditures | \$ | \$ | \$ | \$ | \$ | \$ | \$ |
| Ending Balance | \$ | \$ | \$ | \$ | \$ | \$ | \$ |
| Was the most recent Bank Statement Submitted? [Y/N] | | | | | | | |
| MONTHLY HOUSE REPORT INFORMATION | | | | | | | |
| Day and Time of Business Meeting | | | | | | | |
| Number of Members Owing EES | | | | | | | |
| Total EES Owed to House | \$ | \$ | \$ | \$ | \$ | \$ | \$ |
| Current Number of Members | | | | | | | |
| Current Number of Vacancies | | | | | | | |
| Monthly House Rent | \$ | \$ | \$ | \$ | \$ | \$ | \$ |
| Amount of Rent Paid for Current Month | \$ | \$ | \$ | \$ | \$ | \$ | \$ |
| Are All Financial Obligations Paid In Full? [Y/N] | | | | | | | |
| Total Outstanding Financial Obligations | \$ | \$ | \$ | \$ | \$ | \$ | \$ |
| Was Central Office Dues Paid Last Month? [Y/N] | | | | | | | |
| Was Revolving Loan Paid Last Month [Y/N] | | | | | | | |
| Did Secretary Respond to Weekly Text Message? [Y/N] | | | | | | | |
| Was House Email Checked Daily? [Y/N] | | | | | | | |
| Was House Voicemail Checked Daily? [Y/N] | | | | | | | |

House Reports (Continued):

| MONTHLY HOUSE FINANCIAL SUMMARY REPORT INFO | | | | | | | |
|---|----|----|----|----|----|----|----|
| HOUSE NAME | | | | | | | |
| NUMBER OF BEDS | | | | | | | |
| Beginning Balance | \$ | \$ | \$ | \$ | \$ | \$ | \$ |
| Total Deposits | \$ | \$ | \$ | \$ | \$ | \$ | \$ |
| Total Expenditures | \$ | \$ | \$ | \$ | \$ | \$ | \$ |
| Ending Balance | \$ | \$ | \$ | \$ | \$ | \$ | \$ |
| Was the most recent Bank Statement Submitted? [Y/N] | | | | | | | |
| MONTHLY HOUSE REPORT INFORMATION | | | | | | | |
| Day and Time of Business Meeting | | | | | | | |
| Number of Members Owning EES | | | | | | | |
| Total EES Owed to House | \$ | \$ | \$ | \$ | \$ | \$ | \$ |
| Current Number of Members | | | | | | | |
| Current Number of Vacancies | | | | | | | |
| Monthly House Rent | \$ | \$ | \$ | \$ | \$ | \$ | \$ |
| Amount of Rent Paid for Current Month | \$ | \$ | \$ | \$ | \$ | \$ | \$ |
| Are All Financial Obligations Paid In Full? [Y/N] | | | | | | | |
| Total Outstanding Financial Obligations | \$ | \$ | \$ | \$ | \$ | \$ | \$ |
| Was Central Office Dues Paid Last Month? [Y/N] | | | | | | | |
| Was Revolving Loan Paid Last Month [Y/N] | | | | | | | |
| Did Secretary Respond to Weekly Text Message? [Y/N] | | | | | | | |
| Was House Email Checked Daily? [Y/N] | | | | | | | |

List Any **House Issues** Discussed At This Meeting:

Old Business: Any Business Addressed That Was Discussed/Unfinished From A Previous Meeting:

New Business:

Date, Time and Location of Next Meeting:

Time Meeting Adjourned:

Signature of Secretary:

Date: