

Crysophylos Acknowledgement of Duty

OFFICE OF CRY SOPHYLOS

ACKNOWLEDGEMENT OF DUTY

NAME _____ DATE _____

CHAPTER _____ SCHOOL _____

I, _____, a regularly initiated Frater in Tau Kappa Epsilon Fraternity, and having been officially installed in that office, do hereby acknowledge my oath of office to uphold the Constitution and Bylaws of Tau Kappa Epsilon International Fraternity, the constitution, bylaws, and rules and regulations of my chapter.

AND, FURTHERMORE, I specifically acknowledge the following as my duties and responsibilities:

1. To act as treasurer.
2. To collect all monies due the chapter and to disburse the same, paying all bills which have been approved.
3. To keep accurate and true account of all financial transactions.
4. To make reports of receipts and expenditures when required.
5. To remit promptly (within 15 days) to the Offices of the Grand Chapter all initiation registrations and fees.
6. To make financial reports in sufficient copies, filing one with the Offices of the Grand Chapter, one with the Board of Advisors, one with the Chapter Advisor, one with the Chapter File, and posting one for all members of the chapter to read.
7. To assist in making the chapter budget.
8. To make monthly written reports to the chapter of receipts and disbursements, all bills receivable and bills payable, and the length of time the same has been running, with a summary comparing each with the previous month, the same to be filed with the Grammateus and incorporated in the minutes.
9. To perform such other duties as may be prescribed in the bylaws of this chapter or directed by the Board of Advisors.

10. To file an Annual Report with the Offices of the Grand Chapter as required by the Black Book.

11. To make sure the new members' INITIATE FORMS and FEES are remitted to the Offices of the Grand Chapter in a timely manner, with ALL information filled out.

12. To register ALL Candidates AS SOON AS THEY ACCEPT THE BID, so that they may receive their Candidate Kits prior to the first meeting with the Hegemon.

Signed _____ Print
Name _____

Address :

My term expires _____