# NEW HAMPSHIRE VFW POST BUSINESS OPERATIONS INSPECTION FORM

POST #	DISTRICT #		LOCATION			INSPECTION DATE					
CANTEEN/CLUBROOM OPERATIONS											
New Hampshire Liq	uor Commission li				Expiration Date:						
					Type of License:						
New Hampshire Liq	uor Commission li	cense/permit #:			Expiration Date:						
					Type of License:						
New Hampshire Liq	New Hampshire Liquor Commission license/permit #:				Expiration Date:						
					Type of License:						
Name of Canteen Manager:					Name of House/Canteen Chair						
BINGO OPERATIONS											
New Hampshire Lot	ttery Commission I			Expiration Date:							
Name of Bingo Cha	ir?			Does the Post participate in unit Bingo?							
Are all workers registered?				Date last quarterly report filed with Lottery Commission?							
Total amount of pri	zes last quarter?			Total amount of donations last quarter?							
LUCKY 7/KENO											
Lucky 7 License #			Date Expires								
KENO LICENSE #			Date Expire								
WORKFORCE											
Post Employer Iden	tification Number	(EIN):	Does th	e Post	have 1099 Contract Lab	or Employees?					
Does the Post have on file an Immigration & Naturalization				Does the Post have an Internal Revenue Service Form W-4 for							
				each employee?							
Date of last Internal Revenue Service (IRS) 941 Deposit?				Amount of Last Deposit?							
Date of last New Hampshire Workforce Commission State				Total Amount Paid?							
Unemployment Tax?											
Date of last Internal Revenue Service (IRS) form 940				Total amount paid?							
payment?											

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Date of Last 990 filed with Internal Revenue Service	
(IRS)	

FUNDRAISING ACTIVITIES										
Buddy Poppies		Tournaments (Golf, Pool, dart,	Hall Rentals		Karaoke					
	Y	etc.)		YN		Y M				
Dances		Live or recorded music	Food/beverage eve	ents	Kitchen Rentals					
	Y	Y	[	Y		Y M				
Commercial Kitchen New Hampshire De		New Hampshire Department of	of Health permit #		Expiration date:					
	YM									
Pool Tables	Vendor		Shuffleboard	Vendor						
X			Y							
Juke Box	Vendor		Darts	Vendor						
Y			Y M							
Video EBOTS	Vendor		Sweepstakes	Vendor						
Y M			Y							
REGULATROY FEES AND TAXES										
New Hampshire Meals and Rooms Tax #:			Date of Issue?	Payments	are made?					
				Monthly	Quarterly	Annually				
Date of Last Payment?			Amount of last payment?							
American Society of Composers, Authors and Publishers (ASCAP) & BMI International (BMI) for any of the following: (Juke Box, Live Music, Disc Jockey Services, Audio Systems, Karaoke, etc.)										
Date of last payr	ment?		Amount of last payment?							
Inspector Comm	ients									
DOST COMMANDA	:D·		The Inspector shall provide a copy of each inspe to the Post Commander, District Commander State Inspector. <b>POST WILL PRESENT TO N</b>							
				BERSHIP	AT NEXT REGULA IN POST FILE AS A					
INSPECTOR:					NT RECORD					

# INSTRUCTIONS FOR COMPLETING THE POST BUSINESS OPERATIONS INSPECTION REPORT

Make every effort to answer each question accurately and completely. Some questions require dollar amounts or dates to be inserted.

The purpose of the Inspection Report is to provide the State Commander and the State Inspector with a factual report on the operating condition of the Post.

### **CANTEEN/CLUBROOM OPERATIONS**

- 1. List the New Hampshire Liquor Commission License Number and expiration date from the posted license. Most Posts will only have one license, there are Posts that have two or more and those need to be listed as well.
- 2. Name of Canteen Manager and name of House or Canteen Committee Chairman.

#### **BINGO OPERATIONS**

- 1. List the New Hampshire Lottery Commission License Number and expiration date from the Posted license if the Post conducts Bingo Operations.
- 2. Name of Bingo Chair, participation in unit Bingo and all workers registered are self-explanatory.
- 3. List date of last quarterly report filed with Lottery Commission by looking at the report that was filed.
- 4. List total amount of prizes and donations from this report.

# **WORKFORCE**

- 1. List the Post Federal Employer Identification Number (EIN or FEIN) from the IRS document that as- signed the Post the number or recent 990.
- 2. List the Post response to 1099 Contract Labor as a yes or no as well as the questions on the INS Form I-9 and IRS Form W-4.
- 3. List date and amount of last IRS 941 Deposit by looking at the Deposit Receipt.
- 4. List date of the last TWC payment and amount by looking at the receipt or check stub.

### **FUNDRAISING ACTIVITIES**

- 1. Answer Yes or No to each section by circling the answer given to you by the Post Commander or Post Quartermaster.
- 2. If the Post has a Commercial Kitchen, then list the New Hampshire Department of Health Permit Number and expiration date.
- 3. For those questions that ask for a vendor list the name of the vendor for the item, if the Post owns the item then list Post as the vendor.

## **REGULATORY FEES AND TAXES**

- 1. List the New Hampshire Room and Meals Number from the posted document and its date of issue.
- 2. Circle how often state sales tax is paid by the Post.
- 3. List the Date of last payment and amount from the Room and Meals report filed by the Post.
- 4. Inspector Comments is where the Inspector will list any additional items of concern, recommendation, etc. that he or she feels is warranted from the inspection that the State Inspector and State Commander should know about.
- 5. Inspector and Post Commander signatures are required, a copy should be left with the Post and the original sent to Department Headquarters by mail, fax, or email attention State Inspector.