

Cabell County Commission Verification of Receipt of Policies and Procedures

I have received, reviewed and will follow the policy and procedures.

Name _____

Date _____

__ End of Month Accounting Procedures

__ End of Year Accounting Procedures

__ Administering Grant Policies and Procedures

__ Outstanding Check Polices and Procedures

Adopted – March 23, 2017

Revised - _____

Reapproved - _____