

CDFA FAIRS AND EXPOSITIONS
CEO RESIGNATION/RETIREMENT CHECKLIST

| PART I - TO BE COMPLETED BY BOARD CHAIR | | | |
|---|-----------------|---|-----------------------------------|
| Name: Last | First | MI | SSN (Last 4 Digits) XXX-XX- |
| | | Position Number | |
| Last Date Worked | Separation Date | Program Contact | Program Contact Phone |
| PERMANENT EMPLOYEE | | | |
| <input type="checkbox"/> Resignation (Attach copy of Resignation Letter) | | <input type="checkbox"/> Lay Off | <input type="checkbox"/> Transfer |
| <input type="checkbox"/> Retirement | | <input type="checkbox"/> Other - On file with Human Resources | |
| <input type="checkbox"/> Check if lump sum is to be paid out of the position. | | | |

CHECKLIST

Check ALL Applicable Items are Completed the Last Day of Separation or Last Board Meeting:

| | |
|--------------------------|--|
| <input type="checkbox"/> | Passwords for computer, alarm, safe, bank accounts, emails, small vendors, CFSA, credit cards, and phone system are collected. |
| <input type="checkbox"/> | Office keys, vehicle keys, and fairgrounds keys given to Board Chair. Be sure and collect all sets. |
| <input type="checkbox"/> | Cell phone(s), laptop(s), computers are given to Board Chair. |
| <input type="checkbox"/> | WFA badge is returned, if applicable. |
| <input type="checkbox"/> | Bank cards, gas cards, and Purchasing Cards (P-Cards) are returned to Board Chair. |
| <input type="checkbox"/> | Contact CDFA HR and notify of the final date of separation. CDFA HR will work on calculating the leave liability. |
| Next Day: | |
| <input type="checkbox"/> | Borrowed maintenance equipment is collected by the Board Chair. |
| <input type="checkbox"/> | Bank accounts and designated people are changed, signature cards. |
| <input type="checkbox"/> | Submit SO-8 to CDFA HR and STD 634 to the DAA. |
| <input type="checkbox"/> | Passwords and <u>passcodes</u> to <u>alarm</u> , computer, bank accounts are changed. |
| <input type="checkbox"/> | Notify CDFA HR, F&E and CFSA (if used). |
| <input type="checkbox"/> | Final Travel Expense Claims are submitted to the DAA. |
| <input type="checkbox"/> | Release press release about separation. |
| <input type="checkbox"/> | Call all vendors with fair charge account and make appropriate changes. May need to submit written letter to the vendor notifying of the change. |
| <input type="checkbox"/> | Change the voicemail. |

Board Chair Signature _____ Print Name _____ Date _____

CEO Signature _____ Print Name _____ Date _____