# Insert League logo

Agreement for Board Directors/Statement of Understanding

As a member of the Board of Directors, I am fully committed to the vision and work of the League of Women Voters of [name of League] and am dedicated to carrying out its mission—“Empowering votes. Defending democracy.” I understand that in accepting a position:

* + - In addition to being committed to the LWV mission, I understand that it is my duty to make certain that the LWV of [name of League] has the necessary funds to meet its goals and objectives.
    - With other Board members, I am responsible for the fundraising for the organization. I will work with other Board members in developing high expectations for the future, and will take an active part in reviewing, approving, monitoring, and achieving these objectives.
    - I understand that as a Board member, I lead the way. I am a model for others to follow. In order to ensure that the LWV of [name of League] meets its goals and objectives, each Board member must take an active part in the organization’s activities including an annual financial donation as part of the foundation’s annual giving campaign or a commitment to give a major or planned-gift.
    - I will actively engage in fund-raising in whatever ways are best suited for me and most effectively serve the purposes of the LWV of [name of League]. These may include individual solicitation, undertaking special events, and writing mail appeals. I am willing to make this good-faith agreement to do my best and to raise as much money as I can.

In signing this document, I understand that no quotas are being set, and no rigid standards of measurement and achievement are being established. Every Board member makes a statement of faith to be a partner with every other Board member to strive for the success of our great cause. We trust each other to carry out the above agreements to the best of our ability.

Name of Board Member

(Please Print)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Signature)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(Date)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_