



## FLORIDA WING UNIT COMMANDER'S STATEMENT OF UNDERSTANDING

### COMMAND:

1. As the commander within Florida Wing, I understand that I am responsible for adhering to and ensuring the adherence of the members under my command to all CAP Regulations, Florida Wing Supplements and Operating Instructions.
2. I attest that I will conduct myself in accordance with the objectives, policies and operational directives of the Civil Air Patrol and will govern my actions in accordance with Florida Wing established policies.
3. I accept responsibility for the safety and success of my unit and its members.
4. I will empower my members; equipping them with the knowledge and skills required to achieve success through an effective and professional training program that supports all 3 missions of the Civil Air Patrol.
5. I understand that any and all Memorandums of Understanding must be submitted to Wing for review and approval.

### FINANCIAL MANAGEMENT:

1. I understand the importance of transparency in all financial transactions conducted on behalf of my unit. Thus, I will include my finance officer and the members of the finance committee in all discussions regarding financial transactions.
2. I understand that petty cash is not permitted. At no time will I, or any of the members under my command, hold on to cash longer than the time required to deposit in a timely manner.
3. I understand that I may only use the Wing Banker account established for me by the Florida Wing. At no time will I open an account without written permission from the Florida Wing Commander.
4. I understand that I am not a corporate officer. I may not obligate the Civil Air Patrol, including the unit under my command, to any contract or financial agreement. All proposals shall be passed to Wing Headquarters.

### RESOURCE MANAGEMENT:

1. I understand that once I sign for CAP equipment, it becomes my personal responsibility for the care, safety, and accountability of that equipment.
2. I will follow CAP regulations whenever issuing or rescinding the issue of CAP property to a member under my command.
3. I will insure that all members of my command remain aware of the financial responsibility of having corporate equipment assigned to them.

### FRAUD, WASTE and ABUSE:

1. I understand that Fraud, Waste and Abuse are a drain on the time, effort and resources of the Civil Air Patrol and its members. I understand that I have a duty to report any suspected violations to the Wing Commander. I understand that there is a confidential Fraud, Waste and Abuse Hotline at National Headquarters that I may use by dialing 877-227-9142 and selecting Option 4.
2. I will not take reprisals or retaliate against a member in my command that makes an allegation of Fraud, Waste or Abuse.
3. I will be conscious of my actions and make every attempt to avoid an appearance of impropriety including, but not limited to, activities or actions that could be construed as fraudulent, abusive or wasteful.

### CHAIN OF COMMAND:

1. I understand that the chain of command is vital to the success of CAP. I will always work with the lowest possible echelon in order to accomplish my tasks and will ensure the members under my command do the same.
2. I will always contact and communicate through the appropriate Group Commander when contacting a member of the Florida Wing staff or any Region or National Headquarters personnel as long as it is reasonable to do so. However, after unsuccessfully attempting to resolve an issue with the Group Commander, I may file a complaint under CAPR 173-2 without contacting or communicating through him/her.

### CIVIL AIR PATROL UNITY:

1. I understand and will ensure my actions and the actions of the members under my command will be in keeping with the Florida Wing's philosophy of One Civil Air Patrol.
2. I will never prohibit a member of my command from attending an event, activity or exercise at any other CAP unit of which he/she would otherwise be permitted to attend unless I believe it would endanger his/her safety to do so. I will make every attempt to address any concerns I have with the project officer and the Group Commander.
3. I understand that I have a responsibility to disseminate all appropriate Group, Wing, Region and National level activities to all members under my command.

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Unit Commander Printed Name and Grade

\_\_\_\_\_  
Unit Commander Signature

\_\_\_\_\_  
Date

UNIT NAME: \_\_\_\_\_

UNIT CHARTER: SER-FL-\_\_\_\_\_