



2010 Chapter Officer/Chairman Report Form

_____ Chapter

Term Year from: _____ to: _____

President: _____ E-mail: _____

Vice President: _____ E-mail: _____

Secretary: _____ E-mail: _____

Treasurer: _____ E-mail: _____

Managing Director: _____ E-mail: _____

Career Services Chairman: _____ E-mail: _____

Certification Chairman: _____ E-mail: _____

Club Foundation Liaison: _____ E-mail: _____

Education Chairman: _____ E-mail: _____

Legislative Chairman: *(One per state within the chapter's boundaries.)*

Name: _____ State: _____ E-mail: _____

Membership Chairman: _____ E-mail: _____

Public Relations Chairman: _____ E-mail: _____

Premier Club Services Liaison: _____ E-mail: _____

Student Chapter Liaison: *(Chapter must represent an official Student Chapter to list this position.)*

Name: _____ Student Chapter: _____ E-mail: _____

Technology Chairman: _____ E-mail: _____

Wine Society Chapter Representative: _____ E-mail: _____

Elected Board Members (other than the chairmen positions listed above):

Name: _____ E-mail: _____

President's Annual Report Form

(2010 Term Year)

Name of Chapter: _____

President Reporting: _____

This report covers chapter activities for the term year (November 1, 2009, through October 31, 2010) and should be submitted to the CMAA Chapter/Member Services Department no later than January 1, 2011, for chapter records.

1. Please review your chapter boundaries listed in the most recent CMAA *Yearbook*. If there has been a change, please state the new chapter boundaries and include chapter minutes verifying the change.

2. If there are regions within the chapter, please list names and boundaries:

3. If amendments were made to your chapter's bylaws this year, include a copy of the chapter's current bylaws. (*Chapter bylaws must be in compliance with the CMAA Bylaws.*)

4. In accordance with Article XII of the CMAA Bylaws, our chapter has held at least four educational programs as part of its chapter meetings.

Yes No, please explain _____

5. All chapter meeting minutes should be sent to the National Headquarters within 15 days of each meeting. Rosters for all (Educational, Business and Social) meetings must be included with the minutes for proper credit to be given to participants. Check with your Chapter Secretary/Managing Director to verify that all chapter meeting minutes have been submitted.

I certify that our chapter record system is in use and the Chapter Secretary is submitting minutes as requested.

Yes No, please explain _____

6. Our annual chapter dues are: \$ _____

Dues include (check all that apply) Meals Education Other _____

7. The 2010 Vice President, Secretary, Treasurer, Career Services, Certification, Club Foundation, Education, Legislative, Membership, Public Relations, Premier Club Services, Student Chapter, Technology and Wine Society Chapter Liasons/Chairmen (as reported by the chapter and if applicable) have fulfilled their responsibilities as outlined in the *Chapter Officer and Director Handbook* and should be awarded the proper Association Activity credits.

Yes No, please explain _____

Officer/Director term start date: _____ end date: _____

8. All chapters are required to file (as applicable) with the Internal Revenue Service:
Form 990, "Return of Organization Exempt from Income Tax";
Form 990-T, "Exempt Organization Business Income Tax Return";
Form 1024, "Application for Recognition of Exemption under Section 501(a)"; and
Form SS-4, "Application for Employer Identification Number."

I certify that the chapter has filed the required tax forms or is planning to do so.

Yes No, please explain _____

Please include your chapter's tax identification number: _____

9. The chapter participated in the following Association initiative(s):

- CMAA's Web site
- Chapter of the Year
- Excellence in Education
- Idea Fair for Chapters
- Strategic Planning
- Chapters Collecting for Communities
- Auctions to benefit The Club Foundation
- National Club Championship

10. The chapter publishes a newsletter:

Yes, published ____ times/year No

11. The chapter has a Web site: Yes, the address is: _____ No

12. In accordance with the chapter visitation schedule – each chapter receives a National Director's visit at least once every other year – the chapter met with (provide name of National Director, if applicable):

_____ Date of visit/meeting: _____

13. Please list any suggestions that would enable the National Headquarters staff to better assist you and the chapter officers/chairmen with your assigned duties.

I hereby verify that all information contained here is true and correct to the best of my knowledge.

Signed – 2010 Chapter President