



2018 CHAPTER REPORT FORM

PLEASE RETURN BY JANUARY 15, 2019

COUNTY/CHAPTER: _____

YOUR NAME & CHAPTER POSITION TITLE: _____

REGION _____

NUMBER OF CHAPTER MEETINGS IN 2018: _____

2019 CHAPTER COMMITTEE REPORT SUBMITTED? (CIRCLE ONE): Y / N

2018 MEETING MONTHS (INDICATE ALL THAT APPLIED):

_____ JANUARY

_____ FEBRUARY

_____ MARCH

_____ APRIL

_____ MAY

_____ JUNE

_____ JULY

_____ AUGUST

_____ SEPTEMBER

_____ OCTOBER

_____ NOVEMBER

_____ DECEMBER

MEETING PLACE (INDICATE ALL LOCATIONS): _____

DID YOUR CHAPTER HOLD A PRE-RETIREMENT MEETING? (CIRCLE ONE): Y / N

DO PLAN TO HAVE ONE IN 2018? (CIRCLE ONE): Y / N

LOCAL MEMBERSHIP AS OF DECEMBER 31, 2018: _____

DUAL MEMBERSHIP (ORTA AND LOCAL) AS OF DECEMBER 31, 2017: _____

(PLEASE SEND ORTA A UPDATED ROSTER WITH REPORT OR BEFORE
JANUARY 15, 2019)

DO YOU REQUIRE A DUAL MEMBERSHIP: Y / N

NUMBER OF ASSOCIATE MEMBERS: _____

LIFE MEMBERS: _____

ANNUAL MEMBERS: _____

NUMBER OF VOLUNTEER HOURS WORKED IN 2018: _____

GROUPS OR ORGANIZATIONS YOU VOLUNTEERED WITH:

DID YOUR CHAPTER GIVE SCHOLARSHIPS IN 2018?: Y / N

TOTAL AMOUNT IN GRANTS, AWARDS, AND SCHOLARSHIPS GIVEN: _____

PLEASE LIST ACTIVE COMMITTEES AND THEIR LEADERS IN CHAPTER:
