

District President \_\_\_\_\_ District No. \_\_\_\_\_

**\*Include a short summary of your year as District President on how you promoted all National Programs.**

- 1. Were new District Officers elected and installed prior to Department Convention? Yes \_\_\_ No \_\_\_
- 2. Was your District bonded by August 31<sup>st</sup>, 2023 and did you send payment to Department? Yes \_\_\_ No \_\_\_
- 3. Did your District reach 100% Plus Membership by April 30, 2024? Yes \_\_\_ No \_\_\_
- 4. Did your District submit the required 990-N (e Postcard) to IRS and Dept Treasurer by November 15, 2023? Yes \_\_\_ No \_\_\_
- 5. Did you visit all Auxiliaries and report same to Department by April 29, 2024? Yes \_\_\_ No \_\_\_
  - \* Did you check for current proof of bonding of Auxiliary Treasurer/President and verify? Yes \_\_\_ No \_\_\_
  - \* Were all audits current and forwarded to the Department Treasurer? Yes \_\_\_ No \_\_\_
  - \* Were all Delegate sent in to Department with fees and National no fees? Yes \_\_\_ No \_\_\_
  - \* Did you sign all Auxiliary Secretary & Treasurers books at time of visit? Yes \_\_\_ No \_\_\_
  - \* Did you request approval from Department President to assign someone else to visit your own Auxiliary officially? Yes \_\_\_ No \_\_\_
- 6. Did you encourage the Auxiliaries to meet 100% donation commitments for Hospital and National Home? Yes \_\_\_ No \_\_\_
- 7. Did you promote all National Programs on official visitations? Yes \_\_\_ No \_\_\_
- 8. Did you send your visitation reports & monthly reports to the Dept. Chief of Staff and to the Dept. President as required? Yes \_\_\_ No \_\_\_
- 9. Did you or a representative attend Department School of Instruction? Yes \_\_\_ No \_\_\_
 

Representatives Name & position held \_\_\_\_\_

  - \* Did you or a representative attend Department Mid-Winter Conference? Yes \_\_\_ No \_\_\_

Representatives Name & position held \_\_\_\_\_

  - \* Did you or a representative attend the National President's visit? Yes \_\_\_ No \_\_\_

Representatives Name & position held \_\_\_\_\_

10. How many Department Council of Administration meetings did you attend? \_\_\_\_\_

11. Please explain how you helped your District throughout the year. (Use additional paper if needed.)

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\_\_\_\_\_

Original Copy: Awards Chairman  
Copy: District