



Institute of Transportation Engineers

DISTRICT ANNUAL REPORT FORM

for the period \_\_\_\_\_ to \_\_\_\_\_ for District \_\_\_\_\_

Officers:

Current Officers and Committee Chairs:

President	_____
Vice President	_____
Secretary	_____
Treasurer	_____
Technical Chair	_____
Membership Chair	_____
Legislative Coordinator	_____
Student Chapter Coordinator	_____
Others:	
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Financial:

Does your district have a Federal Employer Identification Number?

Yes       No

If yes, what is the number? \_\_\_\_\_

Balance of Funds on hand at the Beginning of the Reporting Period: \$\_\_\_\_\_.

Income for the Reporting Period:

District Dues \$ \_\_\_\_\_  
Gross Income from Meetings \$ \_\_\_\_\_  
Investment Income \$ \_\_\_\_\_  
Advertising Income \$ \_\_\_\_\_  
Other Principal Sources of Income  
(please list below):  
\_\_\_\_\_ \$ \_\_\_\_\_  
\_\_\_\_\_ \$ \_\_\_\_\_  
\_\_\_\_\_ \$ \_\_\_\_\_  
\_\_\_\_\_ \$ \_\_\_\_\_  
  
Total Income: \$ \_\_\_\_\_

Expenditures for the Reporting Period:

Newsletter  
Printing/Postage \$ \_\_\_\_\_  
Travel \$ \_\_\_\_\_  
Meetings \$ \_\_\_\_\_  
Special Projects \$ \_\_\_\_\_  
Awards \$ \_\_\_\_\_  
Other Expenditures:  
\_\_\_\_\_ \$ \_\_\_\_\_  
\_\_\_\_\_ \$ \_\_\_\_\_  
\_\_\_\_\_ \$ \_\_\_\_\_  
\_\_\_\_\_ \$ \_\_\_\_\_  
  
Total Expenditures: \$ \_\_\_\_\_

Net Income (Expense) \$ \_\_\_\_\_

Balance of Funds on hand at the End of the Reporting Period: \$ \_\_\_\_\_

Was there a change in the District Bylaws during this reporting period? (If yes, please attach a copy of the new bylaws.)

Yes       No

Technical Activities:

List Projects underway by title and, if available, provide expected date of completion:

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List Projects by title which were completed during this reporting period and, if available, attach a copy of the report:

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Legislative Activities during this reporting period:

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Meetings held during this reporting period:

Date \_\_\_\_\_ Location: \_\_\_\_\_  
Purpose: \_\_\_\_\_ Attendance: \_\_\_\_\_

Date \_\_\_\_\_ Location: \_\_\_\_\_  
Purpose \_\_\_\_\_ Attendance: \_\_\_\_\_

Date: \_\_\_\_\_ Location: \_\_\_\_\_  
Purpose: \_\_\_\_\_ Attendance: \_\_\_\_\_

Date: \_\_\_\_\_ Location: \_\_\_\_\_  
Purpose: \_\_\_\_\_ Attendance: \_\_\_\_\_

Date \_\_\_\_\_ Location: \_\_\_\_\_  
Purpose: \_\_\_\_\_ Attendance: \_\_\_\_\_

Date: \_\_\_\_\_ Location: \_\_\_\_\_  
Purpose: \_\_\_\_\_ Attendance: \_\_\_\_\_

Student Chapter Activities during this reporting period:

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Awards Presented during this reporting period:

Award Name: \_\_\_\_\_  
Recipient's Name: \_\_\_\_\_  
Purpose of Award: \_\_\_\_\_

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Form of the Award: \_\_\_\_\_

Award Name: \_\_\_\_\_  
Recipient's Name: \_\_\_\_\_  
Purpose of Award: \_\_\_\_\_

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Form of the Award: \_\_\_\_\_

Award Name: \_\_\_\_\_  
Recipient's Name: \_\_\_\_\_  
Purpose of Award: \_\_\_\_\_

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Form of the Award: \_\_\_\_\_

Award Name: \_\_\_\_\_  
Recipient's Name: \_\_\_\_\_  
Purpose of Award: \_\_\_\_\_

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Form of the Award: \_\_\_\_\_

Send Annual Report to: Heather Talbert, Chapter Services Coordinator  
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