



August 3, 2021

Dear ITPA Chapter/Club Secretaries,

Each year, clubs and chapters are required to file an annual report to the Region Vice-President (RVP) assigned to their region. We are asking for annual reports to be submitted even if you have not been able to complete a project due to Covid-19. If you have not been able to complete a project due to Covid19, please indicate that on the service project page. RVP's will work with each club on a case by case basis to ensure that the best interest of the club/chapter is considered. Once an approved annual report is filed with the National Office, the club/chapter is eligible to receive a dues refund check. Clubs/Chapters will be reimbursed \$6.00 for each member that has paid dues for the current year. Your annual twelve month reporting period may be calendar year, your fiscal year or your election of officer year.

Enclosed with this letter are three (3) documents:

1. Chapter/Club Annual Reporting Form
2. Chapter/Club AZ List
3. RVP Checklist

These forms are to be completed and received (postmarked) by the RVP **no later than September 26th** to be eligible for dues reimbursements. Late submissions, incomplete forms, or failure to provide all of the requested documents may result in forfeiture of your club's dues refund.

**PLEASE KEEP IN MIND THAT YOU MUST INCLUDE COPIES OF ALL OF THE FOLLOWING FOR A DUES REFUND :**

- MEETING MINUTES FROM ANNUAL MEETING
- CURRENT LIST OF OFFICERS INCLUDING ITPA MEMBERSHIP NUMBER (this can be found on you're A-Z membership list)
- SERVICE PROJECT AND DESCRIPTION (AT LEAST ONE IS REQUIRED PER YEAR)
- CORRECTED/UPDATED AZ LIST (see note below)

**NOTE:** Due to the spreadsheet layout of the AZ lists and the size of some club's rosters you are not required to print your club's AZ list to include with your Annual Report Forms. However, all AZ lists MUST still be updated, with changes clearly indicated. You may return your UPDATED AZ list directly to the National Office via email for processing. Please be sure to indicate this on your RVP Checklist form to avoid any delays in processing your forms. The membership database will be updated according to the information you provided on the updated/corrected AZ List. Please ensure it is *accurate and legible*.



Dues reimbursements will be processed after all of the completed Chapter/Club Annual Reporting forms and updated/corrected AZ Lists have been returned to the National Office. Refund checks are typically mailed to the club treasurer during the month of October. It is ***extremely*** important that accurate address information be provided for your club officers. Completion of the annual report is required in order to be eligible to participate in the National Awards Program.

Should you have any questions or concerns, please contact Alissa Moss at the National Office either by e-mail, [itpa@telecom-pioneers.net](mailto:itpa@telecom-pioneers.net), at the address and telephone number listed below or your RVP indicated on the enclosed RVP Checklist.

Sincerely,

Alissa Moss  
Executive Director, ITPA



# Independent Telecommunications Pioneer Association Annual Report Form

Updated AZ list has been sent directly to the National Office via email for processing:

YES or NO

(If no is indicated above, you must include a printed copy of your updated AZ list in this packet)

Our Chapter/Club has met the minimum requirements and is eligible for a dues reimbursement. We also understand that all requested attachments must be provided with this report and the AZ list must be updated. Reports must be mailed or emailed to the Region Vice President and postmarked no later than September 26<sup>th</sup>.

Submitted By: \_\_\_\_\_  
Office Held: \_\_\_\_\_  
Date: \_\_\_\_\_

Email Address: \_\_\_\_\_  
Phone: \_\_\_\_\_

## RVP Contact Information

2021-2022 ITPA Regional Vice Presidents - States & Contact Information			
Region 1	Region 2	Region 3	Region 4
New England states - including NJ, PA	North Central/ Western states	Southeast states/ excluding Florida	Midwest states and Florida
Bill Barber	Darlene Roll	Leon Yard	Nancy Schnitzer
Frontier Communications	Sprint/ Centurylink -	Comporium	Embarq - Retired
92 Sylvan Lake Rd	1385 Township Rd 216	2072 Dunlap Roddey Rd.	2005 Wildridge Drive
Hunlock Creek, PA 18621	Bellefontaine, OH 43311	Rock Hill, SC 29730	Tallahassee, FL 32303
	1-419-371-5515	803-448-8116	(850) 562-3416
kim.barber@ftr.com	droll1998@gmail.com	leon.yard@comporium.com	SchnitzerHome@comcast.net
States in each Region			
Connecticut	Delaware	Alabama	Arkansas
Pennsylvania	Indiana	Bermuda	Colorado
Massachusetts	Maryland	Georgia	Iowa
New Hampshire	Ohio	Kentucky	Kansas
New York	Virginia	Mississippi	Louisiana
Rhode Island	Washington DC	North Carolina	Minnesota
Vermont	West Virginia	South Carolina	Missouri
New Jersey	Wisconsin	Tennessee	Nebraska
Maine	Michigan	Bermuda	New Mexico
	Alaska		North Dakota
	Arizona		South Dakota
	California		Illinois
	Hawaii		Oklahoma
	Idaho		Texas
	Montana		Florida
	Oregon		
	Utah		
	Washington		
	Wyoming		
	Nevada		





## Independent Telecommunications Pioneer Association Club and Chapter Annual Report Form

Chapter/Club Name: \_\_\_\_\_ Chapter/Club Number: \_\_\_\_\_

### President

Name: \_\_\_\_\_ ITPA Membership # \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

**Title**

Mr. Ms. Mrs.  
Miss Dr.

E-mail Address: \_\_\_\_\_

**Address Type**

Day Phone: \_\_\_\_\_

Business

Evening Phone: \_\_\_\_\_

Residence

### Vice President

Name: \_\_\_\_\_ ITPA Membership # \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

**Title**

Mr. Ms. Mrs.  
Miss Dr.

E-mail Address: \_\_\_\_\_

**Address Type**

Day Phone: \_\_\_\_\_

Business

Evening Phone: \_\_\_\_\_

Residence

### Secretary

Name: \_\_\_\_\_ ITPA Membership # \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

**Title**

Mr. Ms. Mrs.  
Miss Dr.

E-mail Address: \_\_\_\_\_

**Address Type**

Day Phone: \_\_\_\_\_

Business

Evening Phone: \_\_\_\_\_

Residence

### Treasurer

Name: \_\_\_\_\_ ITPA Membership # \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

**Title**

Mr. Ms. Mrs.  
Miss Dr.

E-mail Address: \_\_\_\_\_

**Address Type**

Day Phone: \_\_\_\_\_

Business

Evening Phone: \_\_\_\_\_

Residence



## Independent Telecommunications Pioneer Association Club and Chapter Annual Report Form

Chapter/Club Name: \_\_\_\_\_ Chapter/Club Number: \_\_\_\_\_

Chapter/Club Mailing Address: \_\_\_\_\_

Does your club/chapter have a social media account? If yes, please list which social media platform is being used, and the name the club is listed as so that we can connect with you: \_\_\_\_\_

### Election of Officers

Date of Election (MM/DD/YY): \_\_\_\_\_

Terms of Office (MM/DD/YY): \_\_\_\_\_

Annual Reporting Dates (MM/DD/YY): \_\_\_\_\_

Which officer should the dues reimbursement check be mailed to? \_\_\_\_\_

### Annual Business Meeting (may be held by teleconference or by electronic mail)

Date of Annual Business Meeting (MM/DD/YY): \_\_\_\_\_

Copy of Minutes from Annual Business Meeting Attached: Yes No

### Service Project

Date of Service Project (MM/DD/YY): \_\_\_\_\_

Description of Service Event:

*If you were not able to complete a project due to the Covid-19 pandemic, complete this section by stating "Unable to complete annual project due to Covid-19."*