

# Zone Director PHCC Convention/Meeting Report



Name: \_\_\_\_\_

Zone Responsible for: \_\_\_\_\_

State Convention Attended: \_\_\_\_\_

Type of Meeting Attended (Regional, Local, etc.) \_\_\_\_\_

What State was meeting held: \_\_\_\_\_

List Any New Officers Elected at The Convention Meeting:

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

4. \_\_\_\_\_

5. \_\_\_\_\_

Please Provide Next State Convention Date: \_\_\_\_\_

Next State Meeting Date: \_\_\_\_\_

List Any Federation Concerns/Problems Raised at the Convention/Meeting

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

4. \_\_\_\_\_

5. \_\_\_\_\_

6. \_\_\_\_\_

7. \_\_\_\_\_

Check-off Appropriate Committee or Group Needed to Address Member Concern/Problem.

- Board of Directors
- Executive Committee
- National Staff

Were any Resolutions presented (please attach)?  YES  NO

Status of Resolution:  PASSED  Tabled  VOTED DOWN

Were you asked to give a National Report  YES  NO

Please list any other type of report you may have been asked to give.

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

Please List which group/body you presented Report to?

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

Was there a trade exhibit connected with the convention or the meeting?  YES  NO

How many exhibitors participated? \_\_\_\_\_

(Please attach a listing of exhibitors if possible.)

Please list any comments or suggestions you may have been given.

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_

Please mail, E-mail or fax your report to PHCC, 180 South Washington St., Falls Church VA 22046

Fax: 703-237-7442

Phone: 1-800-533-7694