**ANNUAL REPORT FOR CCBD SUBDIVISIONS**

**1/31/2015 update**

\*\*PLEASE ELECTRONICALLY SUBMIT THIS DOCUMENT AND UNIT OFFICER FORM **NO LATER THAN** **SEPTEMBER 1st** TO YOUR REGIONAL COORDINATOR

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| **State/Province:** | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | |
| **Individual completing this report:** | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | |
| **Primary Officer contact information:** | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | |
|  |  | |  | | | | | | | | |  | | | | |  | | | | | | | | |  | | |  |
|  | *President:* | |  | | | | | | | | | Email: | | | | |  | | | | | | | | | Ph#: | | |  |
|  |  | |  | | | | | | | | |  | | | | |  | | | | | | | | |  | | |  |
|  | *President-Elect:* | |  | | | | | | | | | Email: | | | | |  | | | | | | | | | Ph#: | | |  |
|  |  | |  | | | | | | | | |  | | | | |  | | | | | | | | |  | | |  |
|  | *Treasurer:* | |  | | | | | | | | | Email: | | | | |  | | | | | | | | | Ph#: | | |  |
|  |  | |  | | | | | | | | |  | | | | |  | | | | | | | | |  | | | |
| **Current Balance in Bank Account of the Subdivision:** | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | |
| **Name of Bank and Location:** | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | |
| **Name of Two Signatories on the Bank Account:** | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | |
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| **Please report activities completed in the last year:** | | | | | | | | | | | |  | | | | |  | | | | | | | | |  | | | |
|  | *Held a state CCBD conference:* | | | | | | | | | | | No | | |  | | | | | Yes | |  | | If yes, dates held: | | | |  | |
|  |  | was it held alone | |  | |  | | | | | | |  | | | | |  | | | | | | |  | | | | |
|  |  | or in collaboration | |  | |  | If collaboration , with what group | | | | | | | | | | | | | | | |  | | | | | | |
|  |  | | |  | |  | | | | | | | | | | | | | | | | | |  |  | | | | |
|  | *Presented Strand of sessions at State CEC Conference:* | | | | | | | | | | | | | No | | | | |  | | Yes | | |  | held on: | |  | | |
|  | *Networking Events* | | | No |  | | Yes | | |  | Describe: | | | | |  | | | | | | | | | | | | | |
|  | *Newsletters* | | | No |  | | Yes | | |  | Describe: | | | | |  | | | | | | | | | | | | | |
|  | *Awards* | | | No |  | | Yes | | |  | Describe: | | | | |  | | | | | | | | | | | | | |
|  | *Other* | | | No |  | | Yes | | |  | Describe: | | | | |  | | | | | | | | | | | | | |
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| **Annual GOAL for Subdivision:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **Proposed Timeline of Annual Events:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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