

AMERICAN SOCIETY FOR
Pain Management

Nursing
Chapter Resource Committee

Dear ASPMN Chapter Leader,

As you know, each chapter of ASPMN needs to submit an end of year report to the ASPMN Board of Directors by July 31, 2009. We encourage that you submit your report electronically to the ASPMN Executive Office. The Chapter Resource and Membership Committee collates the reports. The Achievement and Recognition Committee evaluates copies of all end of year reports and the Chapter Excellence Award will be selected from these reports. This means that all chapters will potentially be considered for the award without filling out an extra application.

If you have any questions about this form, please contact Beth Crowley in the ASPMN national office at BCrowley@goamp.com.

Sincerely,

Ellyn A. Radson, BSN, RN-BC

radsoea@shands.ufl.edu

352/392-2083

ASPMN Chapter Resource and Membership Committee Co-Chair

**American Society for Pain Management Nursing
Chapter Annual Report Form
Due July 31st of each year**

Chapter Name:

This report is reflective of information occurring during July 1, 2008 through June 30, 2009

Business

Check those that apply:

All board and committee meeting minutes are on file

Chapter needs assessment completed; please attach a copy

Bylaws reviewed annually no changes changes (attach amendments)

How many years has your chapter been registered (chartered) at the national office?

A. List dates of business meetings:

B. List recognition/awards given and chapter funded tuitions/ seminars, and name of recipient(s):

C. List last years goals and how accomplished; or work in progress to accomplish:

D. List any community service or education sponsored by the chapter:

E. List chapter committees and chairs:

F. List any fund-raising efforts:

G. List chapter members that served this year as ASPMN Board of Directors members, Committee Chairs, or Committee Members:

H. List any Chapter work with Legislators or Government Agencies:

I. How do you encourage members to be involved with chapter activities?

J. How do you welcome new or transferred members?

Membership (attach current membership list)

Check all that apply:

Membership records on file

All chapter members are members of ASPMN

Do you have a chapter newsletter no yes (please attach a copy)

How are members reminded to renew their annual memberships?

Current chapter annual dues:

List the following numbers of members:

Active members	
International members	
Student members	
Honorary members	
Lifetime members	
Total number of chapter members	

New members this year _____

Chapter membership has: remained the same increased

decreased

Educational (enclose conference brochures)

___Minimum of one per year

Please list educational programs:

Topic	Speaker(s)	Attendance	Sponsor	CEUs
				Y/N
				Y/N
				Y/N
				Y/N
				Y/N

Chapter Goals for upcoming year

Please list:

Do you have a research committee? Y___ N___

How has your chapter supported pain management nursing research?

Other

1. Attach a list of Chapter officers and term of office.

2. List any concerns/problems that your chapter is facing.

3. How can the National Office assist your chapter?

Signature of Chapter President: _____

Signature of Treasurer: _____

Date: _____

Send to: ASPMN Executive Office
Attn: Beth Crowley
PO Box 15473
Lenexa, KS 66285-5473
bcrowley@goamp.com

Financial (attach bank statement)

Check all that apply:

- Financial records on file
 Annual audit of financial records

Starting balance as of July 1, _____
Ending balance as of June 30, _____

Assets:

1. Cash _____
2. Accounts Receivable _____
3. Inventories _____
4. Other Assets _____
Total Assets: _____

Liabilities:

5. Accounts payable _____
6. Contributions/Gifts/grants _____
7. Other Liabilities _____
Total Liabilities _____

Net income _____

Revised 6/2009