

**NEW HAMPSHIRE CONGRESS OF PARENTS AND TEACHERS
LIST OF OFFICERS 2010-2011**

***YOU MUST SUBMIT THIS FORM EVEN IF THERE IS NO
CHANGE IN OFFICERS***

Name of Unit _____ **Fiscal Year** _____
Gross Income ____ <\$25,000 OR ____ >\$25,000 **Date of Last Audit** _____

School's Mailing Address _____
School's Physical Address _____

Additional School Address (If PTA serves more than 1 school)

PRESIDENT _____ **TEL** _____

ADDRESS _____ **email:** _____

VICE PRESIDENT _____ **TEL** _____

ADDRESS _____ **email:** _____

SECRETARY _____ **TEL** _____

ADDRESS _____ **email:** _____

TREASURER _____ **TEL** _____

ADDRESS _____ **email:** _____

**REFLECTIONS
CHAIRPERSON** _____ **TEL** _____

ADDRESS _____ **email:** _____

DUE: JUNE 10, 2010

SUBMIT TO:

**NH PTA OFFICE
5 Sleepy Hollow
Salem, NH 03079**