



2008-2009
OFFICER REPORTING FORM
For Units and Councils

Please indicate the names, term dates, addresses, phone numbers and e-mail addresses of your unit or council officers for the upcoming PTA year 2008-2009. This form must be completed and returned to the: **Montana PTA Office, PO Box 6448, Great Falls, MT 59406** by June 1st in order to receive the Montana PTA Unit Leadership CD and membership cards for the following membership year.

Please change your officer's information on the NPTA Online Membership Data Reporting (OMDR) system (www.pta.org/omdr) by clicking the "OFFICER ENTRY" link to enter your new officers or "EDIT MEMBER/OFFICER INFORMATION" link to change the term dates of your current officers. Officer information will be shared with National PTA.

Please check the appropriate box at the left to indicate which 4 Officers will receive the "Unit Bulletin Subscription" copies of the *Montana PTA Bulletin*.

Unit/Council Name: _____

Permanent PTA Unit/Council Address (school address or PO Box):

Address

City

Zip

President's Name: _____
 Address: _____ Term Start Date _____
 City & Zip: _____ Term End Date _____
 Phone _____ E-Mail address _____

Treasurer's Name: _____
 Address: _____ Term Start Date _____
 City & Zip: _____ Term End Date _____
 Phone _____ E-Mail address _____

Secretary's Name: _____
 Address: _____ Term Start Date _____
 City & Zip: _____ Term End Date _____
 Phone _____ E-Mail address _____

Vice President's Name: _____ Title: _____
 Address: _____ Term Start Date _____
 City & Zip: _____ Term End Date _____
 Phone _____ E-Mail address _____

Vice President's Name: _____ Title: _____
 Address: _____ Term Start Date _____
 City & Zip: _____ Term End Date _____
 Phone _____ E-Mail address _____

If you have more than two Vice Presidents, please attach additional forms.