



Fraternal Order of Police Associates

State Lodge of Ohio

Lodge Visitation Report

Report By:

Date:

Lodge (name, number, district):

Mailing Address:

President:

Name

Phone

Email

Secretary:

Name

Phone

Email

Total Membership Last year:

Membership paid to date this year:

Per Capita paid to date March 1st: \$

June 1st: \$

October 1st: \$

Other: \$

Membership roster current in Database?

Is Lodge IRS EIN tax filing current?

Is membership receiving quarterly State Newsletter?

Any recent events/fundraisers?

Any upcoming events/fundraisers?

Problems/Issues:

Questions or Suggestions for State Lodge:

Signature of Lodge President or Secretary:

Signature of Lodge Officer:

Signature of Visiting State Officer: