

2022 ANNUAL REPORT

Submitted to the Wisconsin Historical Society in accordance with Section 44.03(3) of the Wisconsin Statutes

The annual report includes the following questions. Use this as a reference or a worksheet as you prepare to file the 2022 annual report online at <https://www.wisconsinhistory.org/localhistory-directory/annualreport/login.asp>. If a question does not apply to you, mark it as "does not apply". Contact Amy Norlin amy.norlin@wisconsinhistory.org with questions.

ORGANIZATION NAME: _____

LOCATION AND CONTACT INFORMATION –

Information will be listed on directory at: <https://www.wisconsinhistory.org/localhistory-directory/>

STREET ADDRESS			
CITY, STATE, ZIP			
TELEPHONE NUMBER			
E-MAIL ADDRESS			
WEBSITE			
MAILING ADDRESS, IF DIFFERENT FROM LOCATION ADDRESS			
ORGANIZATION NAME:			
ADDRESS			
CITY, STATE, ZIP			
FEIN NUMBER:			

ORGANIZATIONAL STATISTICS FOR JANUARY 1, 2022 – DECEMBER 31, 2022

DATE OF LAST OFFICER ELECTIONS:	
TOTAL CURRENT MEMBERSHIP:	
TOTAL PAID STAFF (IF ANY):	
TOTAL BUILDINGS OWNED OR OPERATED:	
TOTAL ATTENDANCE IN 2022:	
2022 BUDGET RECEIPTS:	
2022 BUDGET EXPENDATURES:	

FUNDING SOURCES AND AMOUNTS RECEIVED JANUARY 1, 2022 – DECEMBER 31, 2022

VILLAGE:	\$	STATE:	\$
TOWN:	\$	FEDERAL:	\$
CITY:	\$	OTHER:	\$
COUNTY	\$		

Enter current contact information. Update amy.norlin@wisconsinhistory.org as elections occur in 2023.

PRESIDENT

FIRST NAME:		LAST NAME:	
ADDRESS			
CITY, STATE, ZIP			
TELEPHONE:			
E-MAIL:			

VICE PRESIDENT

FIRST NAME:		LAST NAME:	
ADDRESS			
CITY, STATE, ZIP			
TELEPHONE:			
E-MAIL:			

SECRETARY

FIRST NAME:		LAST NAME:	
ADDRESS			
CITY, STATE, ZIP			
TELEPHONE:			
E-MAIL:			

TREASURER

FIRST NAME:		LAST NAME:	
ADDRESS			
CITY, STATE, ZIP			
TELEPHONE:			
E-MAIL:			

BOARD MEMBER

FIRST NAME:		LAST NAME:	
ADDRESS			
CITY, STATE, ZIP			
TELEPHONE:			
E-MAIL:			

BOARD MEMBER

FIRST NAME:		LAST NAME:	
ADDRESS			
CITY, STATE, ZIP			
TELEPHONE:			
E-MAIL:			

BOARD MEMBER

FIRST NAME:		LAST NAME:	
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BOARD MEMBER

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BOARD MEMBER

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E-MAIL:			
STAFF TITLE:			
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E-MAIL:			
STAFF TITLE:			
FIRST NAME:		LAST NAME:	
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CITY, STATE, ZIP			
TELEPHONE:			
E-MAIL:			
STAFF TITLE:			
FIRST NAME:		LAST NAME:	
ADDRESS			
CITY, STATE, ZIP			
TELEPHONE:			
E-MAIL:			

RESOURCE INFORMATION			
RESOURCES INCLUDE MUSEUM BUILDINGS, ARCHIVES, READING ROOM, HISTORIC BUILDINGS, AND DISPLAY CASES, ETC. THIS INFORMATION WILL BE AVAILABLE TO THE PUBLIC ON THE WISCONSIN HISTORICAL SOCIETY WEBSITE.			
RESOURCE:			
ADDRESS:			
CITY, STATE, ZIP:			
TELEPHONE:			
E-MAIL:			
HOURS:			
INFORMATION:			
RESOURCE:			
ADDRESS:			
CITY, STATE, ZIP:			
TELEPHONE:			
E-MAIL:			
HOURS:			
INFORMATION:			

PROGRAMS
List programs, special exhibits, on-line events, and activities which took place during 2022.

REPORT SUBMISSION

Name:	
Title:	
Date:	
Signature:	
Additional Comments or Questions	