

## FEDERATION OF NEW YORK INSURANCE PROFESSIONALS, INC.

To: All Association Presidents

## **Attendance Report**

This form will be used to determine the Membership Attendance Awards. I recommend you keep this form with your monthly roll call and keep it updated throughout the year. It will help you in April when we need to get the attendance for each association meeting.

Number of members attending regular monthly business meetings\* for the following months:

Number of memor	ers attending regular	monumy business meen	ligs for the following months.	
2025	April July October	May August November	June September December	
2026	January	February	March	
not do rol	l call but keep track	•	cational meeting where there is roll call. It ance, this would suffice. If any of the above an X.	•
Total membershi	p as of 3/1/2026			
Total number of	members lost since	4/1/2025		
Number of new n	nembers since 4/1/20	025		
<b>Local Association</b>	name			
Submitted by: _			<u> </u>	
Please complet	te and return this	form to me by 3/1	4/2026.	
Connie Smith, AG	CSR, FIPC			

303 Meyer Road, Apt. #703 West Seneca, NY 14224

Email: csmith@hoffmanhanafin.com or connie.1789@yahoo.com

(716) 870-0914