

2014 ANNUAL REPORT

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

Please complete the following.
If a question does not apply to you, mark it as "does not apply".

Contact Amy Norlin with questions 608-264-6579 or amy.norlin@wisconsinhistory.org

ORGANIZATION NAME: _____

LOCATION AND CONTACT INFORMATION			
STREET ADDRESS			
CITY, STATE, ZIP			
TELEPHONE NUMBER			
E-MAIL ADDRESS			
WEBSITE			
MAILING ADDRESS, IF DIFFERENT FROM LOCATION ADDRESS			
ORGANIZATION NAME:			
ADDRESS			
CITY, STATE, ZIP			
FEDERAL EMPLOYEE ID NUMBER ((FEIN #)			

ORGANIZATIONAL STATISTICS FOR JANUARY 1, 2014 – DECEMBER 31, 2014

DATE OF LAST OFFICER ELECTIONS:	
TOTAL CURRENT MEMBERSHIP:	
TOTAL PAID STAFF (IF ANY):	
TOTAL BUILDINGS OWNED OR OPERATED:	
TOTAL ATTENDANCE IN 2014:	
2014 BUDGET RECEIPTS:	
2014 BUDGET EXPENDATURES:	

FUNDING SOURCES AND AMOUNTS RECEIVED JANUARY 1, 2014 – DECEMBER 31, 2014

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

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:	(608) 862-3227		
E-MAIL:			
BOARD MEMBER			
FIRST NAME:		LAST NAME:	
ADDRESS			
CITY, STATE, ZIP			
TELEPHONE:			
E-MAIL:			
BOARD MEMBER			
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BOARD MEMBER			
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TELEPHONE:			
E-MAIL:			
STAFF TITLE:			
FIRST NAME:		LAST NAME:	
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STAFF TITLE:			
FIRST NAME:		LAST NAME:	
ADDRESS			
CITY, STATE, ZIP			
TELEPHONE:			
E-MAIL:			
STAFF TITLE:			
FIRST NAME:		LAST NAME:	
ADDRESS			
CITY, STATE, ZIP			
TELEPHONE:			
E-MAIL:			

RESOURCE INFORMATION

RESOURCES INCLUDE MUSEUM BUIDLINGS, ARCHIVES, READING ROOM, HISTORIC BUIDLINGS, 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:

RESOURCE:

ADDRESS:

CITY, STATE, ZIP:

TELEPHONE:

E-MAIL:

HOURS:

INFORMATION:

PROGRAMS

List programs and activities for 2014. Example: Exhibits, public programs, events, fundraisers, lectures, new construction, and major acquisitions.

COLLECTIONS INFORMATION

ARCHIVAL COLLECTIONS	
Does your organization collect archival materials (Papers, letters, photos, audiotape)?	
If yes, estimate how much is in your archival collections?	
Are these collections available to the public?	
Does your organization collect oral history interviews and/or post 1945 materials?	
HISTORIC PRESERVATION	
Does your organization lease a building? If yes, from a private or public entity.	
Does your organization own a building(s)? If yes, is it listed on the National Register of Historic Places?	
MUSEUM COLLECTIONS	
Approximately how many museum objects/artifacts does your organization own?	
Do you keep an inventory of your collection? If yes, paper records or computer database?	
Do you use PastPerfect collections software?	
Does your organization have a formal written collections policy?	

REPORT SUBMISSION

Name:	
Title:	
Date:	
Signature:	

RETURN COMPLETED REPORT BY FEBRUARY 27, 2015 TO:

**AMY NORLIN
WISCONSIN HISTORICAL SOCIETY
816 STATE STREET
MADISON, WI 53706**