

Chapter Annual Report

Houston Chapter, SfN

Part I: Chapter Information

Names and addresses of new Chapter officers for 2010 - 2011

President Name David W. Marshak University/Institution Department of Neurobiology and Anatomy, UT-Houston Address PO box 20708 City State Zip Houston, TX 77225 Email Address David.W.Marshak@uth.tmc.edu

Vice-President Name University/Institution Address City State Zip Email Address

Secretary Name University/Institution Address City State Zip Email Address

Treasurer Name University/Institution Address City State Zip Email Address

Number of Current Chapter Members:

Regular:	Postdoctoral Trainees:
Graduate Students:	Undergraduate Students:
	universities involved in chapter activities: UT-Houston, Rice f Medicine and The University of Houston
Does your chapter currently of If so, how much are dues? Does your chapter have a well If so, please list the URL: http Does your chapter have a Face	osite: Xes No p://www.uth.tmc.edu/sfnhouston/

Does your chapter issue a regular newsletter: Yes If so, please attach a copy of the newsletter to your cor		
Part II: Chapter Finances		
A. CASH BALANCE at BEGINNING of fiscal year ((This BEGINNING balance must be the END balance on last		\$ 0
B. INCOME: Chapter Grants Member Dues Chapter Meeting Registration Fees Fundraising In Kind Support Donations Other (list major items):	\$ 2000	
C. TOTAL INCOME (total of B)*		\$ 2000
D. EXPENSES: Meetings Seminars Brain Awareness Week (BAW) Outreach Website Other (list major items):	\$ 2000	
Other miscellaneous		
E. TOTAL EXPENSES (total of D)		\$ 0
F. SURPLUS or (deficit) (Total income less total exp	enses; C - E)	\$
G. CASH BALANCE at END of fiscal year (December IRS (Internal Revenue Service) Employee Identification (For U.S Chapters Only)		\$ 0
Chapter financial records for 2010 - 2011 have been au	ıdited: 🛛 Yes 🗌 No	
* U.S. chapters—if your chapter's total income is less than \$25,00 exceeds \$25,000, please file form 990EZ. If you chapter exceeds		

regular 990) must be filed every year by the 15th day of the 5th month after the close of your tax year. Please note that you should file your forms directly with the IRS but please also send SfN a copy

Part III: Chapter Meetings

You may attach additional information about meetings to this report.

Date and Time: 9:00 AM Saturday, February 5, 2011
 Location: Sid Richardson College, Rice University
 Please briefly describe any major decisions made or notable discussions points: held in conjunction with the Neuroscience Group of the Gulf Coast Consortia

2. Date and Time:

Location:

Please briefly describe any major decisions made or notable discussions points:

3. Date and Time:

Location:

Please briefly describe any major decisions made or notable discussions points:

4. Date and Time:

Location:

Please briefly describe any major decisions made or notable discussions points:

5. Date and Time:

Location:

Please briefly describe any major decisions made or notable discussions points:

Part IV: Chapter Activities

Please provide a brief, two sentence description of each event your chapter held as well as fill in the provided grid. If you have additional information about your event, or if you would like to include pictures, please attach items to your report.

1. Event:Public Forum 2/12/2011

Information required	Who	Institutions involved
Organized and run by	Amanda Concha	UT-Houston
Neuroscience Research Center		
Collaborating Chapters?		
Attendees		
160		

2.	2. Event: Brain Night 3/17/2011 Health Museum				
	Information required	Who	Institutions involved		
	Organized and run by Neuroscience Research Center	Amanda Concha	UT-Houston, Rice University		
	Collaborating Chapters?				

Attendees 200

3. Event:

Information required	Who	Institutions involved
Organized and run by		
Collaborating Chapters?		
Conditional Chapters.		
Attendees		

4. Event:

Information required	Who	Institutions involved
Organized and run by		
Collaborating Chantage?		
Collaborating Chapters?		
Attendees		

5. Event:

Information required	Who	Institutions involved
Organized and run by		
Collaborating Chapters?		
A		
Attendees		

Report Certification:

I certify that the report	information provided is acc	curate and correct to the	e best of my knowledge.
Date: 03/24/2011	Signature:		