Pennsylvania Parks and Forests Foundation

Chapter Annual Report Form

For 12-month period ending 12/31/2025

The Year in Review

Chapter Name: _____

Information Submitted By: _____

(Name and position held in group)

Please complete and return this form by January 31, 2026 to:

Marci Mowery

PA Parks and Forests Foundation

704 Lisburn Road, Suite 102

Camp Hill, PA 17011

or via email: mmowery-ppff@pa.net **and** pmetzger@paparksandforests.org

Board of Directors (required): Use attached form or provide your own list.

(PPFF's directors and officers insurance provider requires current information in order to provide coverage.)

(Whether you use your own form or the one provided, ALL directors must sign an updated conflict of interest form each year.

Funds Raised (required) : Use attached form.

Projects and Activities : Use attached form.

Please list your greatest challenge this past year:

What do you view as the highlight or greatest accomplishment of the past year?

What steps have you taken or are planning to take to expand your reach to diverse communities?
Bear in mind that both PPFF and DCNR have made Diversity, Equity, and Inclusion a high priority for programs and facilities.

☐ Do you have a current work plan? If yes, please provide a copy. If no, can we help you prepare one?

☐ Do you have a budget for 2026? Please provide a copy. Creating a Simple Budget by Andre and Mary of the Friends of Pine Grove Furnace can be found in the Creating a Simple Budget dropdown of Friends Resources of the website

☐ Do you have any training needs or is there another way PPFF can help you succeed?

How often do you use the Friends Resources section of website or our YouTube channel?

Website	***You Tube***
☐ Frequently	☐ Frequently
☐ Occasionally	☐ Occasionally
☐ Rarely	☐ Rarely
☐ There's a website?	☐ There's a YouTube channel?

ADD PPFF TO YOUR DISTRIBUTION LISTS:

Please make sure we have a copy of your minutes from each meeting throughout the year. We can't always make it
Share your event flyers so we can help you promote.
Please send your newsletter, either by mail at the office or email to mmowery-ppff@pa.net and pmetzger@papark
Please make sure we have a copy of your membership brochure. We add samples to the Friends Resources.
Please share your photographs for the library!

Pennsylvania Parks and Forests Foundation
Information For Website Directory and Other Public Use

Point of Contact (POC) for Group :

(Primary person to receive information from PPFF and is listed publicly as the chapter contact on our website.)

POC Address :

POC Phone :

POC Email:

Your web URL if you have one :

Your Facebook page if you have one :

Web/Facebook Contact :

Does your chapter or board meet regularly? Yes: ☐ No: ☐

(If yes, on what schedule and where?)

Please list all of the following planned for the upcoming year; or be sure to update to Pam at pmetzger@paparksandforests.org for the calendar of events when they are scheduled.

Special Events: (If any events are anticipated where vendors will be selling goods please indicate with an x or * for the PPFF promoters' license application.)

In the coming years, new laws governing hayrides will be enforced. If you are planning a hayride, be certain to familiarize yourself with the process. Review the video training provided by the Dept of Ag on the Resources page of the website.

Volunteer Days:

Please list any volunteer needs you may have

(e.g., web/Facebook/social media help, membership, trail workers, etc.)

Pennsylvania Parks and Forests Foundation
Board of Directors 2026

This list is used internally only by PPFF to send updates via email and mail and to assure proper insurance coverage for your board members. The annually required Conflict of Interest form is available on the PPFF website.

CHAIR

First Name: _____ Last Name: _____

Address 1: _____

Address 2: _____

City: _____ State: _____ Zip: _____

Phone: _____ E-Mail: _____

☐ ***Conflict of Interest statement provided***

VICE CHAIR

First Name: _____ Last Name: _____

Address 1: _____

Address 2: _____

City: _____ State: _____ Zip: _____

Phone: _____ E-Mail: _____

☐ ***Conflict of Interest statement provided***

SECRETARY

First Name: _____ Last Name: _____

Address 1: _____

Address 2: _____

City: _____ State: _____ Zip: _____

Phone: _____ E-Mail: _____

☐ ***Conflict of Interest statement provided***

TREASURER

First Name: _____ Last Name: _____

Address 1: _____

Address 2: _____

City: _____ State: _____ Zip: _____

Phone: _____ E-Mail: _____

☐ ***Conflict of Interest statement provided***

DIRECTOR

First Name: ______________________ Last Name: ______________________

Address 1: ______________________

Address 2: ______________________

City: ______________________ State: ________ Zip: ________

Phone: ______________ E-Mail: ______________________

☐ ***Conflict of Interest statement provided***

DIRECTOR

First Name: ______________________ Last Name: ______________________

Address 1: ______________________

Address 2: ______________________

City: ______________________ State: ________ Zip: ________

Phone: ______________ E-Mail: ______________________

☐ ***Conflict of Interest statement provided***

DIRECTOR

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Phone: ______________ E-Mail: ______________________

☐ ***Conflict of Interest statement provided***

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Phone: ______________ E-Mail: ______________________

☐ ***Conflict of Interest statement provided***

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☐ ***Conflict of Interest statement provided***

DIRECTOR

First Name: ____________ Last Name: ____________

Address 1: ____________

Address 2: ____________

City: ____________ State: ______ Zip: ______

Phone: ____________ E-Mail: ____________

☐ ***Conflict of Interest statement provided***

Pennsylvania Parks and Forests Foundation

PPFF Chapter Financial Report

12-month period ending 12/31/2025

REVENUE:

Membership Dues	_____
Contributions - Individual	_____
Contributions - Corporate	_____
Events (Revenue from sales, event admissions, etc.)	_____
Sales (Please specify: firewood, ice, etc.)	_____
Grants (More information outlined below)	_____
Program Fees	_____
Small Games of Chance Proceeds	_____
Value of In-Kind Contributions	_____
Other (Please specify source.)	_____
Total Income	_____

GRANTS

Did you receive any grants in 2025?

Yes: _____ No: _____

If yes, please list. Attach additonal page if necessary:

Grant Source: _____

Grant Amount: _____

Project Funded: _____

Do you plan to apply for grants in 2026?*

Yes: _____ No: _____

If yes, please list prospective source, amount and project summary:

**** Prior to applying for any grant, Chapters must contact Marci (717.236.7644 or mmowery-ppff@pa.net) to confirm that the application conforms to the PPFF Bylaws, the Chapter workplan and applicable DCNR regulations.***

Do you currently have an additional checking account?

Yes: _____ No: _____

If yes, have you submitted your year end paperwork to Bernadette?

Yes: _____ No: _____

Do you have regular sales of merchandise (other than ice and firewood)?

Yes: _____ No: _____

_____ We have a regular on-site store.

_____ We sell merchandise at events.

_____ Other: Explain.

Have you submitted your end of year inventory to Marci and Bernadette?

Yes: _____ No: _____

We don't presently have sales but would like to learn more about how to do that.

Yes: _____ No: _____

Pennsylvania Parks and Forests Foundation
2025 Projects and Activities

(Feel free to attach additional pages if needed)

Service Projects:	# Projects Hosted	_____
	Estimated Attendance	_____
	Project Descriptions: Include recurring work days at the park, cleanups, any improvement projects at the park utilizing volunteers, outside service groups, etc. and dates held.	_____
Special Events:	# Events Held	_____
	Estimated Attendance	_____
	Event Descriptions: Include type of events and date held. "Events" would include annual events such as craft and other fairs, concerts, etc.	_____
Other Activities:	Other Activities	_____
	Estimated Attendance	_____
	Descriptions: Include type of activity and dates held for any activity that doesn't fall into one of the above categories. Tabling at malls or other events might be an example.	_____
Volunteers:	Total number of volunteers your group has had for the year.	_____
	Estimated volunteer hours provided	_____

Please provide the following statistics on projects completed this year.

# of playgrounds installed or expanded _____

# of fishing piers installed or expanded _____

# of ADA launches installed or expanded _____

# of trees planted _____

# of gardens planted (or maintained) _____

# of trails maintained _____

# of miles of trails maintained/built _____

# of trail bridges built/repaired _____

# of bluebird boxes (or other cavity nesters) built or maintained _____

# of interpretive panels installed or educational materials purchased _____

# of roadside/shoreline cleanups hosted _____

# of amphitheater or educational facility upgraded, built, or otherwise maintained _____

# of historic structures upgraded or otherwise maintained _____

# of painting projects (buildings or trail blazes for example) _____

# of LNT courses attended _____

# of other trainings attended _____

Other projects (number and description) you would like to highlight _____