

## Model Letterhead for Local Branch



### Indian Medical Association

..... Local Branch

Address.....Ph.....Fax.....

Website (if any) ..... E-Mail : .....

#### President

Dr. \_\_\_\_\_

Address. \_\_\_\_\_

Ph. \_\_\_\_\_

e-mail: \_\_\_\_\_

#### Hony. Secretary

Dr. \_\_\_\_\_

Address. \_\_\_\_\_

Ph. \_\_\_\_\_

e-mail: \_\_\_\_\_

#### Hony. Finance Secretary

Dr. \_\_\_\_\_

Address. \_\_\_\_\_

Ph. \_\_\_\_\_

e-mail: \_\_\_\_\_

#### Immediate Past President

Dr. \_\_\_\_\_

#### President Elect

Dr. \_\_\_\_\_

#### Vice President

Dr. \_\_\_\_\_

#### Joint Secretary

Dr. \_\_\_\_\_

#### Assistant Secretary

Dr. \_\_\_\_\_

#### Central Council Members

Dr. \_\_\_\_\_

Dr. \_\_\_\_\_

Dr. \_\_\_\_\_

#### State Council Members

Dr. \_\_\_\_\_

Dr. \_\_\_\_\_

Dr. \_\_\_\_\_

#### Branch Executive Members

(Chairman & Secretaries of various wings & Schemes)

All Communications intend for **Branch office** should be addressed to the

Hony. Branch Secretary

## MONTHLY REPORT FORMAT

### INDIAN MEDICAL ASSOCIATION

IMA Head Quarters

New Delhi – 110002

### MONTHLY REPORT FORMAT

Name of The Local Branch	
Name of The State Branch	
Branch email id(Correspondence)	
Membership strength (1 <sup>st</sup> april 20 ----to 31 <sup>st</sup> march,20--)	

(pl. attached details on separate sheets)

1. Topic for CME Name of Speakers Name of Speakers	
Community Related Projects done	
a. Any Combined District/Zonal state/National meets Sponsored by your Branch	
b. Details of Participation in any state/National IMA events by your Branch	
c. Govt. Health Programmes Implemented by your branch during this month.	
d. Observation of any International / National Designed dates/weeks/month by your branch.	
e. Any Immunization activity by your branch.	
3.Social / Cultural	
4. Any legal members concern issues and solution by your branch.	
5.Any Other.	

NB:-

1.Additional sheets may be attached if necessary

2.Please enclose documents in the form of Invitation / Notice / Photographs /  
News Cuttings / Appreciation letters / Certificates etc.

3.Please send the report along with the Documents to the following address so as  
to reach on or before 10<sup>th</sup> of the next month.