

Skills of the Secretary

National
Association of
Postal Supervisors
Training

Secretary Duties

Administration, Accuracy and Transparency



Duties of a NAPS Branch Secretary



Note

Many branches
have combined Secretary
duties with Treasurer
duties.

What does a NAPS Secretary do?

Officers Training Manual (OTM)

Secretary's Responsibilities

- 3.1. Definition of a Secretary
- 3.2. Dues Check-Off Print-Out (DCO)
- 3.3. Communicating with NAPS Headquarters
- 3.4. Record Keeping
- 3.5. Meeting Minutes
- 3.6. Branch Newsletters and Web Sites
- 3.7. Merging Branches
- 3.8. *The Postal Supervisor* Distribution
- 3.9. Invitations to NAPS Headquarters



Secretary's Responsibilities

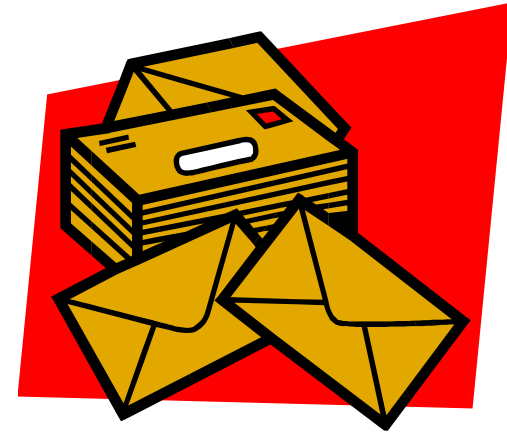
- Membership Rolls
- Correspondence
- Record Keeping
- Meeting Minutes

Printed: 8/20/2014 National Association of Postal Supervisors Page: 1
1727 King Street, Suite 400, Alexandria, VA 22314-2753

NAPS Dues Check-Off Report Remote Local ()

July 1, 2014 - July 31, 2014 for Pay Periods 14,15

Member Name	Finance	Des	PP 14	PP 15	Total	Status
Regular Members						



Secretary's Responsibilities

Membership Rolls

- Types of Members
- Membership Forms
 - 1187
 - 1187A
- Dues Withholding
- Dues Check-Off List
- Member Exceptions

NAPS FORM 1187
Rev. April 2013

**UNITED STATES POSTAL SERVICE
AUTHORIZATION FOR DEDUCTION OF DUES**

PLEASE PRINT LEGIBLY Converting from Direct Pay to Dues Withholding PLEASE PRINT LEGIBLY

(All information required) **EMPLOYEE INFORMATION**

EMPLOYEE'S NAME (Last, First, Initial) _____

STREET _____
(Home Address Only - DO NOT USE WORK ADDRESS)

CITY _____ STATE _____ ZIP+4 _____

SOCIAL SECURITY NUMBER (Required) _____ (Required) _____

LIFE EMPLOYEE OR ANNUAL (Required) _____ PENSION NUMBER (Listed on PAY STUB) _____

NON-GOVERNMENT MAIL (Optional) _____ HOME PHONE (Optional) _____

I hereby authorize the United States Postal Service (USPS) to deduct from my pay each pay period the amount certified below as the regular dues of the National Association of Postal Supervisors (NAPS), which includes a yearly subscription for The Postal Supervisor magazine as part of the membership dues, and to remit such amounts to that organization in accordance with its arrangements with USPS. I further authorize any change in the amount to be deducted which is certified by NAPS as a uniform change in its dues schedule.

I understand that this authorization will become effective the pay period received by the IRS Shared Service Center (SSC), PO Box 975460, Greensboro, NC 27407-0460 or following pay period. I further understand that my dues may only be canceled either by separation from the USPS or by using USPS PS Form 1188, Cancellation of Organization Dues from Payroll Withholding, and that I may revoke this authorization at any time by filing the original of such a revocation form with the USPS SSC, PO Box 975460, Greensboro, NC 27407-0460. PS Form 1188 is available on the USPS Intranet on the Bureau page. Such revocations will not be effective however until the first full pay period following March 1st or September 1st of any calendar year, whichever date first occurs after the PS Form 1188 is received in the SSC. See EIM Section 725 for full explanation of Cancellation of Dues Withholding guidelines. Additional information may be obtained by calling SSC at 1-877-477-3273 option 5.

Due to the National Association of Postal Supervisors are not deductible as charitable contributions. However, they may be tax deductible as ordinary and necessary business expenses.

SIGNATURE OF EMPLOYEE, POST OFFICE TITLE AND LEVEL _____ DATE _____

S NATIONAL ASSOCIATION OF POSTAL SUPERVISORS BRANCH NUMBER OR STATE _____

I hereby certify that the regular dues of this organization for the above named member are currently established at \$_____ per pay period.

SIGNATURE AND TITLE OF BRANCH OFFICER (Required) _____ TITLE _____ DATE _____

NAPS SPONSOR (If applicable - all information required) PLEASE PRINT LEGIBLY

SPONSOR'S NAME _____ BRANCH # _____

ADDRESS _____

CITY _____ STATE _____ ZIP+4 _____

ORIGINAL AND ONE COPY - SEND TO NAPS HEADQUARTERS, 1727 King St, STE 400, Alexandria, VA 22314-2753
RETAIN ONE COPY FOR BRANCH RECORDS
GIVE ONE COPY TO EMPLOYEE



Secretary's Responsibilities

Types of Members

- Active – USPS Employed
- Associate – USPS Retired
- Honorary - No benefits

Membership Forms

- 1187 - Active
- 1187A - Associate

NAPS FORM 1187
Rev. April 2011

UNITED STATES POSTAL SERVICE
AUTHORIZATION FOR DEDUCTION OF DUES

PLEASE PRINT LEGIBLY
(All information required)

Converting from Direct Pay to Dues Withholding PLEASE PRINT LEGIBLY
EMPLOYEE INFORMATION

EMPLOYER'S NAME (Last, First, Initial) _____

STREET _____
(Home Address Only - DO NOT USE WORK ADDRESS)

CITY _____ STATE _____ ZIP+4 _____

SOCIAL SECURITY NUMBER (Required) _____

USPS EMPLOYER'S NUMBER (Required) _____ MEMBER NUMBER AS LISTED ON PAY STUB _____

NON-EMPLOYMENT BANK (Optional) _____ STATE PHONE (Optional) _____

I hereby authorize the United States Postal Service (USPS) to deduct from my pay each pay period the amount certified below as the regular dues of the National Association of Postal Supervisors (NAPS), which includes a yearly subscription for The Postal Supervisor magazine as part of the membership dues, and to remit such amounts to that organization in accordance with its arrangements with USPS. I further authorize any change in the amount to be deducted which is certified by NAPS as a uniform change in its dues structure.

I understand that this authorization will become effective the pay period received by the IRS (Internal Service Center (IRIS/CSC), PO Box 970400, Glenview, NC 27047-0400) or following pay period. I further understand that my dues may only be cancelled either by separation from the USPS or by using USPS PS Form 1188, Cancellation of Organization Dues from Payroll Withholding, and that I may revoke this authorization at any time by filing the original of such a revocation form with the USPS IRIS/CSC, PO Box 970400, Glenview, NC 27047-0400. PS Form 1188 is available on the USPS Intranet on the Finance page. Such revocation will not be effective however until the first full pay period following March 1st or September 1st of any calendar year, whichever date first occurs after the PS Form 1188 is received by the IRIS/CSC. (See ELM Section 952 for full explanation of Cancellation of Dues Withholding guidelines.) Additional information may be obtained by calling IRIS/CSC at 1-877-477-3273 option 5.

Dues in the National Association of Postal Supervisors are not deductible as charitable contributions. However, they may be tax deductible as ordinary and necessary business expenses.

SIGNATURE OF EMPLOYEE, POST OFFICE TITLE AND LEVEL _____ DATE _____

S NATIONAL ASSOCIATION OF POSTAL SUPERVISORS BRANCH NUMBER OR STATE _____

I hereby certify that the regular dues of this organization for the above named member are currently established at \$_____ per pay period.

Title _____ DATE _____

SIGNATURE AND TITLE OF BRANCH OFFICER (Required)

NAPS SPONSOR (Required - all information required) PLEASE PRINT LEGIBLY

SPONSOR'S NAME _____ BRANCH # _____

ADDRESS _____

CITY _____ STATE _____ ZIP+4 _____

ORIGINAL AND ONE COPY - SEND TO NAPS HEADQUARTERS, 1727 King St, STE 400, Alexandria, VA 22314-2753
RETAIN ONE COPY FOR BRANCH RECORDS
GIVE ONE COPY TO EMPLOYEE



Secretary's Responsibilities

Active Members - Complete Form 1187

- Social Security # (*USPS required*)
- USPS EIN (*NAPS required*)
- No USPS/Gov't email
- Form 50 Finance #
 - Branch dues amount
 - Branch affiliation #
- Signature of new member
- Signature of branch officer (*optional*)
- Mail original & copy to NAPS HQ
 - Make copies for branch and member
- Complete sponsor section for \$25

NAPS FORM 1187
Rev. April 2011

**UNITED STATES POSTAL SERVICE
AUTHORIZATION FOR DEDUCTION OF DUES**

PLEASE PRINT LEGIBLY (All information required) CONSENTING FROM DIRECT PAY TO DUES WITHHOLDING PLEASE PRINT LEGIBLY
EMPLOYEE INFORMATION

EMPLOYEE'S NAME (Last, First, Initial) _____

STREET _____
(Show Address Only - DO NOT USE WORK ADDRESS)

CITY _____ STATE _____ ZIP+4 _____

SOCIAL SECURITY NUMBER (Required) _____

USPS EMPLOYEE ID NUMBER (Required) _____ PENSION NUMBER ASSIGNED ON PAY FILE _____

NEW EMPLOYMENT MAIL (Optional) _____ HOME PHONE (Optional) _____

I hereby authorize the United States Postal Service (USPS) to deduct from my pay each pay period the amount certified below as the regular dues of the National Association of Postal Supervisors (NAPS), which includes a yearly subscription for The Postal Supervisor magazine as part of the membership dues, and to remit such amounts to that organization in accordance with its arrangements with USPS. I further authorize any change in the amount to be deducted which is certified by NAPS as a unitary charge in its dues 404 form.

I understand that this authorization will become effective the pay period received by the IRS Internal Service Center (IRIS/C), PO Box 975406, Overland Park, KS 66207-0400 or following pay period. I further understand that my dues may only be cancelled either by separation from the USPS or by using USPS PS Form 1187, Cancellation of Organization Dues From Payroll Withholding, and that I may revoke this authorization at any time by filing the original of such a revocation form with the IRIS/C, PO Box 976406, Overland Park, KS 66207-6406. PS Form 1187 is available on the USPS Internet on the Finance page. Such revocation will not be effective however until the first full pay period following March 1st or September 1st of any calendar year, whichever date first occurs after the PS Form 1187 is received by the IRIS/C. Use EIM Section 925 for full explanation of Cancellation of Dues Withholding guidelines. Additional information may be obtained by calling IRIS/C at 1-877-477-3273 option 5.

Dues to the National Association of Postal Supervisors are not deductible as charitable contributions. However, they may be tax deductible as ordinary and necessary business expenses.

SIGNATURE OF EMPLOYEE, POST OFFICE TITLE AND LEVEL _____ DATE _____

S NATIONAL ASSOCIATION OF POSTAL SUPERVISORS BRANCH NUMBER OR STATE _____

I hereby certify that the regular dues of this organization for the above named member are currently established at \$_____ per pay period.

TITLE _____ DATE _____

SIGNATURE AND TITLE OF BRANCH OFFICER (Optional) _____

NAPS SPONSOR (Required - all information required) PLEASE PRINT LEGIBLY

SPONSOR'S NAME _____ BRANCH # _____

ADDRESS _____

CITY _____ STATE _____ ZIP+4 _____

ORIGINAL AND ONE COPY - SEND TO NAPS HEADQUARTERS, 1727 King St, STE 400, Alexandria, VA 22314-2753
RETAIN ONE COPY FOR BRANCH RECORDS
GIVE ONE COPY TO EMPLOYEE


NOTE: Don't hold for branch approval. Mail ***immediately*** the signed Form 1187 to NAPS HQ to ensure members receives benefits.



Secretary's Responsibilities

Associate Members

- Complete Form 1187A
 - Last 4 of Social Security #
 - Select branch to affiliate
(*May join any NAPS branch*)
 - Associate member signature
 - Mail to NAPS HQ
- Inform branch via letter/email to become associate member -- branch contacts NAPS HQ
- Retiree contacts NAPS HQ directly via letter/email requesting associate membership



NATIONAL ASSOCIATION OF POSTAL SUPERVISORS
REQUEST FOR ASSOCIATE MEMBERSHIP
PLEASE PRINT LEGIBLY

ASSOCIATE MEMBER INFORMATION

ASSOCIATE MEMBER'S NAME _____
Last First MI

MAILING ADDRESS _____

CITY _____ STATE _____ ZIP+4 _____

SOCIAL SECURITY NUMBER # (Last 4) _____

NON-GOVERNMENT MAIL COURAGE _____ CONTACT PHONE NUMBER _____

I hereby request Associate membership in accordance with Article III, Section 3 of the National Association of Postal Supervisors (NAPS) National Constitution & Bylaws. I understand that the amount of Associate membership dues is one-half (1/2) the national regular per capita, plus any additional amount as determined by the local NAPS Branch in which I have requested membership; and my full dues is paid directly to that Branch. I further understand that Associate membership includes a yearly subscription for *The Postal Supervisor* magazine.

I understand that my Associate membership will remain in effect until I notify NAPS headquarters in writing to terminate my membership. Alternately, the Branch with which I am associated is authorized to notify NAPS headquarters to terminate my membership if I fail to pay my Associate membership dues as established by the Branch. If I elect to change my branch affiliation as an Associate member, I must notify NAPS headquarters in writing of such change.

Dues to the National Association of Postal Supervisors are not deductible as charitable contributions.

I hereby request Associate membership in LOCAL or STATE BRANCH NUMBER _____

SIGNATURE OF APPLICANT FOR ASSOCIATE MEMBERSHIP _____ DATE _____

This is not an official US Postal Service form. This is a NAPS form for optional use to request Associate membership. Requests for Associate membership may be sent via NAPS 1187-A, personal letter, fax or email by the individual requesting branch membership. Associate members have the right to request membership to a NAPS branch of their choice.

SEND ORIGINAL ASSOCIATE MEMBERSHIP FORM 1187-A TO NAPS HEADQUARTERS, 1727 King St, STE 400, Alexandria, VA 22314-2753
RETAIN ONE COPY FOR BRANCH RECORDS
GIVE ONE COPY TO ASSOCIATE MEMBER

NAPS ASSOCIATE FORM 1187-A / APRIL 2011



Secretary's Responsibilities

National Per Capita Dues Withholding

Active — Per Capita \$3.50/pay period

- USPS Payroll
- Direct Pay - Pay branch directly

Associates — Per Capita \$1.75/pay period

- Notify Associate when dues is owed
- Pay associate dues directly to branch
- National MAL - Pay directly to NAPS HQ

Branches establish their own dues assessment. Dues must at least cover national per capita.



Secretary's Responsibilities

Cancelling Active Membership

- Member's responsibility to cancel – **Not NAPS!**
- * USPS PS Form 1188 required
 - USPS HR action – send to HRSSC
 - * Exception: if member is in non-deduct status – Not paying branch
 - No email/letter will cancel Active membership
- Cancellation Time
 - 1st full PP in March (see 1187)
 - 1st full PP in September (see 1187)
 - No anniversary date requirement
 - No refund of member's dues



Secretary's Responsibilities

Cancelling Associate Membership

- Can be cancelled any time
 - Member notifies NAPS HQ in writing
 - Branch notifies NAPS HQ in writing
 - Death of Associate - Branch notifies NAPS HQ
- Will be cancelled next available DCO
- No refund of Associate's per capita to branch



Secretary's Responsibilities

Membership Rolls

Request for Branch Affiliation Exception

Article III, Section 6

Section 6. A member's place of residence does not qualify as a criterion for requesting an exception to affiliate with another branch. NAPS Headquarters shall accept requests from members for branch affiliation exceptions in the following situations:

- a) When members are affected by Postal Service-initiated consolidations, or
- b) When a member's office of physical domicile is different from his or her employing office (USPS Finance number of record).

In both cases, the member's attendance and participation at branch meetings and activities would be hampered by physical distance from their employing office. The member's current area vice president shall investigate written exception requests and report said findings to NAPS Headquarters for concurrence by at least two-thirds of the resident officers.

- c) When no local branch in a members' home state is located within 50 miles of their assigned work location.



Secretary's Responsibilities

Monthly Branch Reports from NAPS HQ

- Dues Check-Off (DCO) Report
- Change Report
- Non-Member Report
- Address Report / NAPS Mail List



Secretary's Responsibilities

Dues Check-Off List

- Branch affiliation
- Pay Periods of dues withholding
- Monthly membership roster
 - Active
 - Associate
- Finance #'s
- Status flags
- Total membership
- DCO dues amount to branch

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National Association of Postal Supervisors
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NAPS Dues Check-Off Report

July 1, 2014 - July 31, 2014 for Pay Periods 14,15

Remote Local

Member Name	Finance	Des	PP 14	PP 15	Total	Status
Regular Members						



Secretary's Responsibilities

Managing Dues Check-Off (DCO) Report

DCO Designation	DCO Meaning
ADJ	USPS returned back pay to member, dues too
CANCEL	Membership canceled due to Form 1188
DECR.	Dues of member decreased
INCR.	Dues of member increased
NO DED	No dues deducted for member
NU EMP	New Branch Member - 1187
RET.	Member retired from USPS
SEP.	Member quits USPS or removed by USPS
Asterisk *	Not Receiving Postal Supervisor Bad address listed at NAPS HQ

Secretary's Responsibilities

Managing Dues Check-Off (DCO) Report

Printed: 8/20/2014

National Association of Postal Supervisors

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1727 King Street, Suite 400, Alexandria, VA 22314-2753

NAPS Dues Check-Off Report

Remote Local C

July 1, 2014 - July 31, 2014 for Pay Periods 14,15

Member Name	Finance	Des	PP 14	PP 15	Total	Status
Regular Members						
LES	2528	09	\$10.00	\$10.00	\$20.00	
LOP	5745	09	\$12.50	\$10.00	\$22.50	DECR.
LOP	5745	09	\$10.00	\$10.00	\$20.00	
LOP	5552	09	\$10.00	\$10.00	\$20.00	
LOV	5552	09	\$10.00	\$10.00	\$20.00	
MAI	5156	09	\$10.00	\$10.00	\$20.00	
*MAI	5553	09	\$10.00	\$10.00	\$20.00	
MAI	5157	06	\$10.00	\$10.00	\$20.00	
MC	5745	09	\$10.00	\$10.00	\$20.00	
MIL	1896	08	\$10.00	\$10.00	\$20.00	
MIL	2748	09	(\$3.50)	(\$3.50)	(\$7.00)	NO DED
PRE	06	08	\$10.00	\$10.00	\$20.00	
RAI	49	05	\$10.00	\$10.00	\$20.00	RET.
RAS	74	09	\$10.00	\$10.00	\$20.00	
RHO	18	08	\$10.00	\$10.00	\$20.00	
RIC	96	09	\$10.00	\$10.00	\$20.00	INCR.



Secretary's Responsibilities

Managing Dues Check-Off (DCO) Report

Printed: 8/20/2014

National Association of Postal Supervisors
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NAPS Dues Check-Off Report

Remote Local

July 1, 2014 - July 31, 2014 for Pay Periods 14,15

Member Name	Finance	Des	PP 14	PP 15	Total	Status
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Regular Members

Regular Members

<input type="text"/>	30	08	\$8.00	\$8.00	\$16.00	
<input type="text"/>	30	09	\$8.00	\$8.00	\$16.00	
<input type="text"/>	33	09		\$8.00	\$8.00	NU EMP
L	8	09	\$10.00	\$10.00	\$20.00	
L	5	09	\$12.50	\$10.00	\$22.50	DECR.
L	5	09	\$10.00	\$10.00	\$20.00	
L	2	09	\$10.00	\$10.00	\$20.00	
L	2	09	\$10.00	\$10.00	\$20.00	
M	6	09	\$10.00	\$10.00	\$20.00	
M	3	09	\$10.00	\$10.00	\$20.00	
M	7	06	\$10.00	\$10.00	\$20.00	
M	5	09	\$10.00	\$10.00	\$20.00	
M	6	08	\$10.00	\$10.00	\$20.00	
M	8	09	(\$3.50)	(\$3.50)	(\$7.00)	NO DED

Associate Members

E	<input type="text"/>	09	(\$1.75)	(\$1.75)	(\$3.50)	
S	<input type="text"/>		(\$1.75)	(\$1.75)	(\$3.50)	
Associate Total			(\$3.50)	(\$3.50)	(\$7.00)	



Secretary's Responsibilities

Managing Dues Check-Off (DCO) Report

NAPS Change Report

Printed: 8/20/2014

National Association of Postal Supervisors
1727 King Street, Suite 400, Alexandria, VA 22314-2753

Page: 1

NAPS Change Report

Remote Loca

Current changes applied July 9, 2014 - September 5, 2014

Member Name

Change Notes

--

USPS Member Roster finance number change. Finance 056770 - SAN DIEGO CA changed to 055157 - MORENO VALLEY CA.
Original branch NAPS*159 changed to NAPS*466 with new finance number.

USPS reported finance number change. Finance 051392 - CATHEDRAL CITY CA changed to 054872 - MENTONE CA.
The finance number change did not trigger a change in the branch.

USPS Member Roster finance number change. Finance 057758 - TEMECULA CA changed to 052528 - ESCONDIDO CA.
The finance number change did not trigger a change in the branch.

USPS Member Roster finance number change. Finance 051309 - CARLSBAD CA changed to 052592 - FALLBROOK CA.
Original branch NAPS*159 changed to NAPS*466 with new finance number.



Secretary's Responsibilities

Managing Dues Check-Off (DCO) Report Non-Member Report

Printed: 8/20/2014

National Association of Postal Supervisors
1727 King Street, Suite 400, Alexandria, VA 22314-2753

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NAPS Non-Member Report
09 Branch # 119 - SPRINGFIELD, MISSOURI Remote Local 287530
July 1, 2014 - August 30, 2014

Member Name	Grade	Gender	Des	Finance	Post Office	Zip Code
C		M	09	287534	SPRINGFIELD MO	65807-9998
F		F	09	286750	REPUBLIC MO	65738-9998
H		M	06	287530	SPRINGFIELD MO	65801-9998
H		M	09	287533	SPRINGFIELD MO	65807-9998
L		F	09	287530	SPRINGFIELD MO	65801-9998
N		M	06	287530	SPRINGFIELD MO	65801-9998
N		M	06	287530	SPRINGFIELD MO	65801-9998
F		F	19	287530	SPRINGFIELD MO	65801-9998
F		M	09	287534	SPRINGFIELD MO	65807-9998

9 Total NonMembers





Secretary's Responsibilities

Managing Members' Addresses

NAPS Mail List

Printed: 1/31/2022

National Association of Postal Supervisors
1727 King Street, Suite 400, Alexandria, VA 22314-2753

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NAPS Mail List
Area 07 - Branch # 255 - HEART OF ILLINOIS BRANCH, ILLINOIS Remote Local 166180
Current Mail List December 2021 (195 Members)

Member Name	EIN	Finance	Email	Address	City, State Zip
ALLEN, ROSHAN		167417		2176 N C	ur, IL 62526
ANDERSON, CRY		162004		540 LAW	ION, IL 62549
ANDREWS, SHEI		161404	crazyca	ahoo.com	ilia, IL 62801-5728
ARBUCKLE, MIC		160378	ARBU	HSI.COM	.SO, IL 61738-1010
ARMSTRONG, L.		161430		3205 Hali	paign, IL 61822-5361
*ARMWOOD, NA		166182		UTF - 16	al, IL BADADD61761
ASHBACHER, D.		166182	DARYI	HER@COMCASTNET	10930 N J LAP, IL 61525
AUSTIN, KIZZIE		161734		113 S 35th	ille, IL 62226-6314
*BARGER, SHEM		165400	shem19	com	UTF - 20 FIELD, IL BADADD62837-174

Secretary's Responsibilities

- Membership Rolls
- Correspondence
- Record Keeping
- Meeting Minutes

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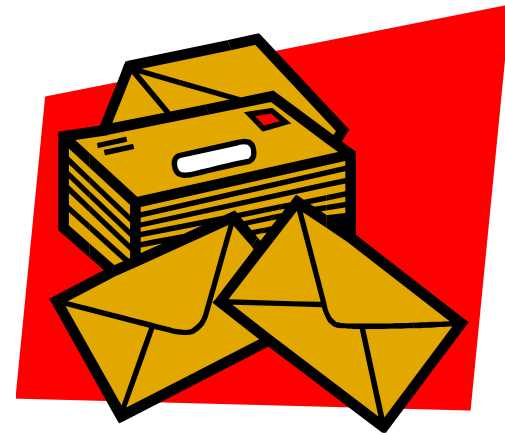
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NAPS Dues Check-Off Report

Remote Local

July 1, 2014 - July 31, 2014 for Pay Periods 14,15

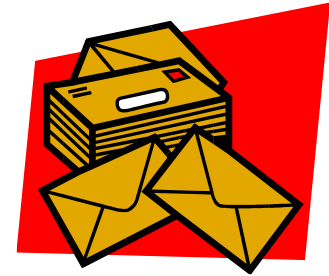
Member Name	Finance	Des	PP 14	PP 15	Total	Status
Regular Members						



Secretary's Responsibilities

Correspondence

- Branch mail
- Officer information & updates
 - *Officer Profiles for receiving NAPS HQ info*
- Member Change-of-Address
 - *To receive The Postal Supervisor*
- Letters/emails to NAPS HQ
 - Member Issues (DCO Status)
 - Invitations to events
 - Changes in branch dues



Secretary's Responsibilities

- Membership Rolls
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- Meeting Minutes

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National Association of Postal Supervisors
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NAPS Dues Check-Off Report

Remote Local ()

July 1, 2014 - July 31, 2014 for Pay Periods 14,15

Member Name	Finance	Des	PP 14	PP 15	Total	Status
Regular Members						



Secretary's Responsibilities

Record Keeping

- Keep records up-to-date & legible
- Update Branch Constitution & Bylaws
- Make files and organize
- Keep centrally located
- Backup computer
- Turn records over to new officers
- Consult lawyer and/or CPA when needed
- Record retention - Don't hoard



Secretary's Responsibilities

- Membership Rolls
- Correspondence
- Record Keeping
- Meeting Minutes

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NAPS Dues Check-Off Report

Remote Local ()

July 1, 2014 - July 31, 2014 for Pay Periods 14,15

Member Name	Finance	Des	PP 14	PP 15	Total	Status
Regular Members						



Secretary's Responsibilities

Meeting Minutes

- Summary of what happened
- Reflects branch's decisions
- Discussion and decisions reported
- Not every comment is quoted
- Motions and votes recorded
- Committee & other reports covered
- Stop meeting for clarification
- Keep a file / backup from computer
- Publish in newsletter or send to members (*optional*)
- Read/copies at next branch meeting



What does a NAPS Secretary do?

Officers Training Manual (OTM)

Secretary's Responsibilities

- 3.1. Definition of a Secretary
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- 3.3. Communicating with NAPS Headquarters
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- 3.8. *The Postal Supervisor Distribution*
- 3.9. Invitations to NAPS Headquarters



Secretary's Responsibilities

- Branch Newsletters and Web Sites
 - Includes Branch meeting minutes
 - Local officer contact information
 - Meeting notices
- Merging Branches
(Article IV, Section 2)
 - Format a petition
 - Majority 50%+1 sign petition to merge
 - Accepted by gaining branch
 - Notify members and NAPS HQ of results
 - Automatic dues adjustment by NAPS HQ



Secretary's Responsibilities

- *The Postal Supervisor* magazine
 - Keep members' mailing list updated
 - Asterisk (*) on DCO report "bad address" of member
 - Notify NAPS HQ of member address changes
- **Invitations to NAPS Headquarters**
 - Send at least 2 months in advance – sooner if possible
 - Provide details of NAPS event (Who, What, Why, When and Where)
 - No charge for Resident Officers to attend
 - Indicate if requesting a particular Resident Officer



Secretary's Responsibilities

Review NAPS

Officer Training Manual (OTM) Chapter 3

Revised January 2022

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Thank You!



Questions?

