



SESSION CHAIR'S REPORT FORM - LECTURE SESSION

Meeting Location: _____ Meeting Dates: _____

Chair(s): _____

Session Designation: _____ Audience Size (estimated during 2nd paper): _____

PAPERS NOT PRESENTED:

Paper Number	First Author	Did you have advance notice? (answer yes or no)
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Please enter below any suggestions for improvements for future sessions, e.g., room size and set-up, av equipment. Thank you.

NOTE: PLEASE COMPLETE THIS REPORT SO THAT WE HAVE A COMPLETE RECORD OF PAPERS THAT WERE NOT PRESENTED. Return this completed report to the Society Office Manager, Elaine Moran at the meeting registration desk before the meeting ends or return it to ASA headquarters immediately after the meeting (1305 Walt Whitman Road, Suite 300, Melville, NY 11747-4300).