



Affiliate Annual Report for Calendar Year 2025

(Complete Attachment B to be considered for one or more 2026 Affiliate Awards.)

To maintain compliance with IAFP Constitution and Bylaws, Affiliates must return this completed report. Please send by email to Susan Smith at: ssmith@foodprotection.org.

Please return the following items **electronically** by **Tuesday, March 3, 2026** (late reports will not be considered for awards):

REQUIRED:

This completed form (*in English*).

Your Association's list of current term officers (complete Attachment A).

OPTIONAL:

Attachment B: Completion required **only** if your Association requests to be considered for one or more Affiliate Awards.

IAFP accepts **all** Affiliate Annual Reports electronically, including those vying for one or more of the Affiliate Awards. *Affiliates seeking to present the highest quality visual presentation are encouraged to present their Annual Report in the highest quality possible for review by the Selection Committee.*

To avoid errors and omissions, please limit your submission to ONE email with all attachments.

Digital photos (with names and descriptions) to appear in the *Affiliate View* quarterly newsletter.

SD Environmental Health Association

1. Your Official Delegate to IAFP Affiliate Council and Contact

Enter in the fields below the information requested for your Association's official Delegate to the IAFP Affiliate Council and your official Contact for IAFP correspondence. **Delegate must be an IAFP Member.**

Official Delegate to IAFP Affiliate Council

Dominic Miller

521 N Main Ave.

Sioux Falls SD 57104

605-367-8760

Dominic.Miller@Siouxfalls.gov

IAFP Member? Y ☒ N ☐

Official Contact for IAFP Correspondence (indicate “same” if person also serves as Delegate)

Same

Address 1

Address 2

City, State ZIP Country

Phone Number

Email address

IAFP Member? Y ☐ N ☐

2. Membership List

- a. Indicate the current total number of members in your Association: 9
- b. How many NEW members joined your Association in 2025? 0

3. Meetings: Annual Meeting/Conference, Educational, Workshops, Webinars, etc.

a. On what date(s) was your most recent general membership or major meeting (i.e., Annual Meeting/Conference) during the past year? Please list number of attendees.
September 18 2025 we had a virtual meeting. Four members attended.

b. Please provide the date(s) and location of your next scheduled major meeting (i.e., Annual Meeting/Conference):
March 2026 scheduled for a virtual meeting.

c. List all other general membership meetings held in 2025 (excluding board meetings). Include title, dates and attendance numbers.

General Membership	March 19, 2025
General Membership	February 26, 2025
Name of Meeting	Date(s) Held & # of Attendees

4. Awards and Scholarships

a. List members honored with an award from your Association and/or IAFP during 2025. Include name of award and qualification for award.

Click here to type recipient's name	Name of Award and how did recipient qualify?
Click here to type recipient's name	Name of Award and how did recipient qualify?
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b. List scholarships awarded during 2025; include recipient and qualification for scholarship.

Scholarship Name/Amount	Recipient Name and how did recipient qualify?
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5. Web Communication

Please be sure to keep the IAFP office on your mailing list for newsletters, email, and other communications to your general membership.

Please provide your existing Affiliate's Web site address AND date last updated:
www.sdeha.org

Did you launch a new Affiliate Web site in 2025? Y ☐ N ☒

Attachment A (completion required)

Association Officers List

*Provide the contact information requested below for all current officers of your Association. **Please indicate if each officer is an IAFP Member (reminder: Your President and Delegate are required to be IAFP Members).** The information you provide here is published on our website and in select membership materials. The information may be typed in the fields below or may be sent to our office by email, fax or regular mail.*

Indicate the term dates (e.g., 2025–2026) for your current Executive Board:
enter term dates

President
Zachary VanDeRostyne
521 N Main Ave.
Sioux Falls SD 57104
605-367-8760
Zach.vdr@siouxfalls.gov
IAFP Member? Y ☐ N ☒

Secretary
Tori O'Brien
1501 S Highline Ave. Ste. 3D
Sioux Falls SD 57110
605-937-8422
Tori.obrien@state.sd.us
IAFP Member? Y ☐ N ☒

Officer Title
Officer Name
Address 1
Address 2
City, State ZIP Country
Phone Number
Email address
IAFP Member? Y ☐ N ☐

Officer Title
Officer Name
Address 1
Address 2
City, State ZIP Country
Phone Number
Email address
IAFP Member? Y ☐ N ☐

President-Elect
Timea Metzger-Nelson
521 N Main Ave.
Sioux Falls SD 57104
605-367-8760
Timea.metzger-nelson@siouxfalls.gov
IAFP Member? Y ☐ N ☒

Treasurer
Kimberly Huff
521 N Main Ave.
Sioux Falls SD 57104
605-367-8760
Kimberly.huff@siouxfalls.gov
IAFP Member? Y ☐ N ☒

Officer Title
Officer Name
Address 1
Address 2
City, State ZIP Country
Phone Number
Email address
IAFP Member? Y ☐ N ☐

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Email address
IAFP Member? Y ☐ N ☐