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| --- | --- |
| Committee/Individual name |  |
| Name of Chair |  |
| Date of last meeting |  |
|  |  |
| Action items completed |  |
| Action items in progress |  |
| Please indicate if items in report are for reporting only (no discussion) or board discussion (and if so, how much time you estimate you will need). | Reporting only\_\_\_\_\_\_\_\_  For discussion\_\_\_\_\_\_\_\_  Intended Vote \_\_\_\_\_\_\_\_  Will need \_\_\_\_\_\_\_\_ minutes. |
| Questions for the Board |  |
| Motions for the Board |  |