|  |  |
| --- | --- |
| 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 |   |