

Agenda Item	Subject, Concern or Problem (See reverse for completion instructions)	
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Co-Chairpersons' Signatures Please indicate by (X) in the brackets below who chaired this meeting

BOIH manager and volunteer co-chair must sign each page of the minutes when they agree that the minutes are complete and accurate

For, or both co-chair do not agree with the minute record please attach comments on a separate page

In my opinion, the above is an accurate record of this meeting

(X) First name of Employer Co-Chair Mari Yasunatsu () First Name of Worker Co-Chair Natasha Lind

Signature _____ Signature _____

Co-Chairperson's Signatures Please indicate by (X) in the brackets below who chaired this meeting

BOH Manager and volunteer who is not sign each page of the minutes when they agree that the minutes are complete and accurate

If one or both who is not sign the minute record please attach comments on a separate page

In my opinion, the above is an accurate record of this meeting

Co-Chairperson's Signatures Please indicate by (X) in the brackets below who chaired this meeting

BOH Manager and volunteer codhis must sign each page of the minutes when they agree that the minutes are complete and accurate

If one or both codhis do not agree with the minutes record please attach comments on a separate page