SUPPERS MEETING SEQUENCE

Day/Meeting Type	<u>Date</u>				Minimum Suggested			
				/		Amount	\$	
Facilitator(s)								
					-			
					_			
First Name					First Name	2		
	amount paid	\$_		_			amount paid	\$
	amount paid	\$_		_			amount paid	\$
	amount paid	\$_		_			amount paid	\$
	amount paid	\$_		_			amount paid	\$
	amount paid	\$_		_			amount paid	\$
	amount paid	\$_		_			amount paid	\$
	amount paid	\$_		_			amount paid	\$
					TOTAL A	MOUNT PAID	\$	
					Reimburse	Facilitator	\$	
					**\$1/plate		\$	
					**Extra Co	ontributions	\$	
					**TOTAL	TO SUPPERS	\$	
Discussion								
Menu								
Other								