



INDUSTRIAL • COMMERCIAL • RESIDENTIAL

544-8882

Joint Health & Safety Committee

Meeting Minutes Recording Form

Minutes of Meeting:

Date:	Start Time:	End Time:	Location:	
MEMBERS:			PRESENT	ABSENT
Worker Co-Chair:				
Management Co-Chair:				
Secretary:				
Worker Members:				
Management Members:				
Guests:				

Agenda Item #	Discussion	Go Do

**Joint Health & Safety Committee
Meeting Minutes Recording Form**

Agenda Item #	Discussion	Go Do

Next Meeting Date:

Place and Time:

Worker Co-Chair:

Management Co-Chair: