PAGE 2	WORKPLA	N Page			
GOAL:				COMMITTEE:	
ACTIVITY:				Board Approval/D	ate:
OUTCOME:				Budget Allocation	
TASKS	PERSONS RESPONSIBLE (NAME)	STAFF COMMITTEE (TIME)	TASK DEADLINE (DATE)	BUDGET \$\$	FOLLOW-UP REQUIRED (IF NEEDED)
1					
2					
3					
4					
5					
6					