NSAI Regional Chapter Report – Meeting Agenda

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| **Coordinator Name:** |
| **Co- Coordinator Name(s):** |
| **Chapter Location:** |
| **Date of Meeting:** |
| **Location of Meeting:** |
| **Time of Meeting:** |
| **Number of Members in Attendance:** |
| **Number of Non-members in Attendance:** |

**Meeting Agenda**

*Please be specific. Use back sheet if necessary.*

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