MINUTES OF MEETING

Project : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**MEETING NAME : ..................................................** No. **.........................**

**DATE & TIME :**

**VENUE :**

**ATTENDEES :**

**TAKEN BY :**

**REVIEWED BY :**

**DISTRIBUTION :** All Attendees

Site Circulation

**ATTACHMENT :**

| **ITEM** | **ISSUE** | **ACTION** | **DATE** |
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NA = Not Applicable, TBA = To Be Advised

These minutes constitute understanding in the meeting’s contents by the taker(s). Should there be any comments, please notify the taker(s) in writing within 7 calendar days after receiving these minutes. Otherwise these minutes are deemed accepted by recipients.