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AHA 0208 (Rev. 3/23)

AHA COMMITTEE MINUTES REPORT

Committee Chair: When your meeting is adjourned, a copy of your minutes must be turned into the AHA office. Thank you for your cooperation.

Please print clearly.

Committee Name _____

Chair Name _____

Meeting Date Month _____ Date _____ Year _____

Meeting Place (City, State) _____

Minutes _____