<b>FSIS CIRCUIT</b>	SAFETY AND	HEALTH	COMMITTEE	REPORT
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1. DISTRICT	2. CIRCUIT	3. TIME		4. DATE OF MEETING
		START	END	

5. LOCATION OF MEETING

6. NAMES OF COMMITTEE MEMBERS ATTENDING	7. NAMES OF COMMITTEE MEMBERS ABSENT		
	() If Construction in the Construction of Construction (CONSTRUCTION, Accessed Barrier)		
8. MINUTES (U	Jse additional sheets of paper if necessary.)		
A. Old Business			

B. Status of Previous Recommendations

C. New Business

D. New Recommendations

9. PRINTED NAME AND SIGNATURE OF C	HAIRPERSON 10. DATE AND LOC	10. DATE AND LOCATION OF NEXT MEETING			
		-4			
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