

**PO Box 3821
Little Rock, AR 72203**

**501-313-3198 info@arlib.org**

**ArLA Board Meeting Report Form**

(Please Complete This Form So That A Complete Record Can Be Maintained In the Office.) Date:

Name:

Report of (Division/Roundtable/Committee):

Agenda Item: Yes No If Yes, Anticipated Time Required:

Information Only Action:

Summary of Action to Be Recommended (If Action Required):

Does This Require A Change In Policy/Procedure? Yes No

Activities since Last Report:

Additional Comments:

Please Include Any Justification/Supportive Materials, Which Might Help in Board Consideration: