**{Name of Team} Sign-In Sheet**

**{Time Period to be Covered}**

|  |  | **Wk 1** | **Wk 2** | **Wk 3** | **Wk 4** | **Wk 5** | **Wk 6** | **Wk 7** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Name** | **Agency/Location** | **Date** | **Date** | **Date** | **Date** | **Date** | **Date** | **Date** |
| **Carrie Allison** (Meeting Chair) | Bureau of Prevention, Promotion, and Support |  |  |  |  |  |  |  |
| **Denise Bertaut** | Bureau of Prevention, Promotion, and Support |  |  |  |  |  |  |  |
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