

Thank you in advance: Please return a copy of this completed form, along with a copy of your committee meeting Action Plan, to Lisa Smith, President's Aide upon completion of the meeting. These minutes are an essential part of the CMAA maintaining its not-for-profit corporate status. Thank you for your cooperation and prompt attention. Debbi Ricks, President, CMAA

*(continued from page 1)*

*Date* \_\_\_\_\_

*Meeting* \_\_\_\_\_

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*New Business:*



*California Medical Association Alliance*  
*Minutes in Brief*  
*2008-09*

*Date* \_\_\_\_\_

*Meeting* \_\_\_\_\_

*Committee Chair* \_\_\_\_\_

*Recorder* \_\_\_\_\_

*The meeting was called to order at:* \_\_\_\_\_ *Meeting Location:* \_\_\_\_\_

*The Meeting adjourned at:* \_\_\_\_\_

*Members in attendance:* \_\_\_\_\_

*Members absent :* \_\_\_\_\_

*Minutes (in brief)*

*Reports*

*Motions & Action Items*

*Unfinished Business:*