

Hotel Food and Beverage Department Meeting Minutes

Date: _____

Time: _____

Venue: _____

Facilitator: _____

Recorder: _____

Attendees

Name	Position	Signature

Agenda

1. _____
2. _____
3. _____

Discussion & Notes

Decisions Made

Action Items

Action Item	Responsible	Deadline	Status

Next Meeting

Date:

Time:

Venue:

Facilitator

Recorder