

SUMMARY WRITERS CHECKLIST

Client Agency: _____

Client Contact: _____

SCG Task Manager: _____

Project Name: _____

Date/Place/Time of Meeting: _____

Charge #: _____

Date Received: _____

Due Date–Draft: _____

Number of Hours: _____

Due Date–Final: _____

Check the type of Summary expected:

- ☐ Action items, recommendations, and group discussions only
- ☐ Executive summary (the above items with brief rationales for recommendations/decisions, introductory background information, and a brief conclusion)
- ☐ Detailed summary of entire meeting
- ☐ Detailed summary of entire meeting with attribution
- ☐ Verbatim transcript
- ☐ Other (please describe)

Number of pages expected: _____

To follow format of previous summary: ☐ Yes ☐ No If Yes, which one?

To be reviewed by (SCG): _____

Date submitted to editing: _____

Date final draft completed: _____

Date of final sign off at SCG _____ by _____

Date submitted to client: _____

Method (courier, disk, e-mail, etc.) _____