



INTERNATIONAL BOUNDARY & WATER COMMISSION  
**WEEKLY TOOLBOX SAFETY MEETING**

Project: \_\_\_\_\_ Contract Number: \_\_\_\_\_  
Date: \_\_\_\_\_ Number of Attendees: \_\_\_\_\_

***SAFETY TOPIC***

***EMPLOYEE'S COMMENTS OR QUESTIONS***

***REMARKS***

**NOTE: Have all attendees sign reverse side of form.**

\_\_\_\_\_  
Contractor's Representative Signature

\_\_\_\_\_  
Position

**WEEKLY TOOLBOX SAFETY MEETING**  
**List of Attendees**

Date: \_\_\_\_\_ Contract Number: \_\_\_\_\_

NAME	COMPANY
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