



# Things to Do List



| Phone Calls              |                    |              |
|--------------------------|--------------------|--------------|
| Check                    | Name & Description | Phone Number |
| <input type="checkbox"/> |                    |              |
| <input type="checkbox"/> |                    |              |
| <input type="checkbox"/> |                    |              |
| <input type="checkbox"/> |                    |              |
| <input type="checkbox"/> |                    |              |



| Meetings                 |                    |                           |
|--------------------------|--------------------|---------------------------|
| Check                    | Name & Description | Meeting date/Time & Place |
| <input type="checkbox"/> |                    |                           |
| <input type="checkbox"/> |                    |                           |
| <input type="checkbox"/> |                    |                           |
| <input type="checkbox"/> |                    |                           |
| <input type="checkbox"/> |                    |                           |

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| Correspondence           |                    |                  |
|--------------------------|--------------------|------------------|
| Check                    | Name & Description | E-mail / Address |
| <input type="checkbox"/> |                    |                  |
| <input type="checkbox"/> |                    |                  |
| <input type="checkbox"/> |                    |                  |
| <input type="checkbox"/> |                    |                  |
| <input type="checkbox"/> |                    |                  |



| Projects                 |             |                              |
|--------------------------|-------------|------------------------------|
| Check                    | Description | Last date / Current Progress |
| <input type="checkbox"/> |             |                              |
| <input type="checkbox"/> |             |                              |
| <input type="checkbox"/> |             |                              |
| <input type="checkbox"/> |             |                              |
| <input type="checkbox"/> |             |                              |



| Miscellaneous Tasks      |             |                              |
|--------------------------|-------------|------------------------------|
| Check                    | Description | Last Date / Current Progress |
| <input type="checkbox"/> |             |                              |
| <input type="checkbox"/> |             |                              |
| <input type="checkbox"/> |             |                              |
| <input type="checkbox"/> |             |                              |
| <input type="checkbox"/> |             |                              |