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# Wyoming Planning & Reporting Coordinator Assignment

Please complete and return this form by mail, email or interoffice mail to the address above on or before **July 15, 2008.**

The following person is assigned as a coordinator for our state agency planning, budgeting and/or reporting process:

Coordinator's Name \_\_\_\_\_

Phone \_\_\_\_\_

Agency \_\_\_\_\_

Mailing Address \_\_\_\_\_

\_\_\_\_\_

Email Address \_\_\_\_\_

**This person is the agency contact for our** (check all that apply):

- Budget
- Action Plan (Strategic Plan)
- Performance Measurement & Self-Assessment (Audit)
- Annual report

We need to have a contact name for each of these four functions. It can be the same person, or more than one, but all four must be covered. Use multiple forms as needed.