Worksheet A: Impacts

|  |  |
| --- | --- |
| Services provided by my organization | Impacts |
| #1:  | #2:  | #3:  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |