BURLINGTON COUNTY AREA OF NA - MOTION FORM

AREA MEETING DATE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

MOTION #\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**FROM**

Maker: ( ) GSR/ ALT. GSR .

 ( ) GROUP .

 ( ) SUB-COMMITTEE .

 ( ) TRUSTED SERVANT .

SECOND: NAME .

 HOME GROUP .

**MOTION**

MOTION:

**INTENT**

INTENT: \_\_\_\_\_\_\_\_\_\_

If passed, will this motion effect a: ( ) POLICY CHANGE? ( ) FINANCIAL IMPACT?

 **DISPOSITION OF MOTION**

|  |  |  |  |
| --- | --- | --- | --- |
| **FOR** | **AGAINST** | **ABSTAIN** | **TABLED** |
|  |  |  |  |