

Motion # _____

SANTA CLARITA AREA OF NARCOTICS ANONYMOUS MOTION FORM

Date _____

Motion Made By _____ Position or Area: _____

Second By _____ Area: _____

Motion Reads: _____

Intent of Motion: _____

Financial Impact on Region: _____

Motion Status == For Secretary's use only	
1	Motion Withdrawn
2	Motion to Table -- Made by _____ Second by _____ Yes _____ No _____ Abstain _____ Motion to table = Pass Fail
3	Motion to Amend -- Made by _____ Second by _____ Yes _____ No _____ Abstain _____ Motion to amend = Pass Fail
4	Main Motion -- Yes _____ No _____ Abstain _____ Main Motion = Pass Fail