

**MID-ATLANTIC REGION OF N.A.**

**MOTION SUBMITTING FORM**

**MOTION:** \_\_\_\_\_  
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**INTENT:** \_\_\_\_\_  
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**SUBMITTED BY:** \_\_\_\_\_ **POSITION:** \_\_\_\_\_

**SECONDED BY:** \_\_\_\_\_ **POSITION:** \_\_\_\_\_

**RESULT:** \_\_\_\_ PASSED \_\_\_\_ FAILED \_\_\_\_ AMENDED \_\_\_\_ TABLED \_\_\_\_ WITHDRAWN

**VOTE:** \_\_\_\_ YEA \_\_\_\_ NEY \_\_\_\_ ABSTENTIONS

\*All motions affecting Regional Policy should be submitted to the Regional Policy Chairperson prior to being submitted to be checked for wording problems which may be misinterpreted in the future.