



A.B.A.T.E. OF OREGON, INC.

MOTION FORM

Date: _____

Motion Made By: _____ Chapter: _____

Seconded By: _____ Chapter: _____

Motion: _____

Amendments: _____

Comments / Actions Taken: _____

Date: _____ Date: _____ Date: _____

VOTING: Action: _____ Action: _____ Action: _____

Favor: _____ Favor: _____ Favor: _____

Against: _____ Against: _____ Against: _____