



CRC MOTION

(check one): Regional Motion Society Motion

Motion Identification No.

Region No.

Motion No.

Date

(Region No., Motion No., Date)

Moved By:

Seconded By:

Motion:

Background Information:

Fiscal Impact:

Staff Impact:

Volunteer Impact:

Vote Count:

For _____ Against _____ Abstained _____ Absent: _____

Chair Voting? Yes No

Passed: Failed: Withdrawn Referred To: _____