MOTION FORM

<u>DATE:</u> <u>7-17-24</u>

MADE BY: Irene B- AAPP & ASBR Task Force Chair

(Name) (Position

(Position – GR & Grp Name / Officer / Coordinator / Cmte Chair)

Sandra F- Past Delegate

SECONDED BY:

(Position – GR & Grp Name / Officer / Coordinator / Cmte Chair)

MOTION: Motion to accept the Ohio Area 44 Alateen Safety and Behavioral Requirements (ASBR), (Please print clearly and state entire motion)

as revised by the ASBR Alateen Task Force, and reviewed by Ohio

(Name)

legal counsel.

MOTION #	<u>#:</u> 8	Motion for: Handbook	Bylay	NS
<u>Simple Ma</u>	ajority (votes neede	d): Substantial Una	nimity (votes n	eeded):
FOR:	AGAINST:	ABSTENTION:	// <u>PASS:</u>	FAIL: