

OFFICIAL KAD 2009 CONFERENCE MOTION FORM

PRINT OR TYPE CLEARLY

MOTION Title: _____

MOTION Author's Name: _____

Motion Author MUST be current member of KAD in good standing. Motions submitted by non-members will NOT be accepted.

MOTION Second by: _____

Proposed MOTION (What, Who, When, How): _____

MOTION Rationale (Why): _____

Estimated MOTION Financial Impact/Cost (What, Who, How): _____

| | |
|-----------------------------------|---|
| DATE: <input type="text"/> | <i>KAD SECRETARY USE ONLY</i> |
| MOTION No. _____ | <input type="radio"/> Passed <input type="radio"/> Failed <input type="radio"/> Tabled <input type="radio"/> Referred to: _____ |
| Secretary Remarks: | |
| _____ | |
| _____ | |
| _____ | |
| _____ | |
| _____ | |