

**AAUW GEORGETOWN BRANCH**  
Required for all Motions

Meeting Name: AAUW Georgetown Board Meeting	
Date:	Motion #

(as you add information in each cell, the space will expand)

that:
To amend:
ACTION:   ___ Amended ___ Adopted ___ Lost ___ Tabled ___ Referred ___ Withdrawn
Motion Moved by:
Motion Seconded by:

Send this completed form to: Vivian Stidvent [vivianstidvent@gmail.com](mailto:vivianstidvent@gmail.com) **no later than five (5) days after this meeting date**