



MIDWEST TENNESSEE AREA SERVICE COMMITTEE
OF NARCOTICS ANONYMOUS

MOTION FORM

Date: _____

Motion By: _____

All motions must be made by a GSR.

Motion:

Seconded By: _____

All motions must be Seconded by a GSR before presenting to the Chair

Chairperson's Signature Verifying the Motion: _____

Motion Number: _____ House Keeping or Group (Circle One)

Maker of the motion explains why the motion was made, his or her position, and its intent
The other GSR who seconded the motion states their point(s) for supporting it.
The Chair opens the Motion for discussion.

The Chair annotates any amendment of the motion:

____ No Second (Motion Dismissed) ____ Tabled (Goes back to home groups for votes)

Reason Motion was Tabled: _____

GSR Votes: ____ For ____ Against ____ Abstain || ____ Passed ____ Failed

This Motion Blank Form was approved by vote on July 29, 2012. Previous motion forms are obsolete.