

017

ORSCNA Regional Motion Form

Motion #: _____
(To be assigned by Secretary)

Date Submitted: 7/9/2023

Motion*: TO REIMBURSE RAO \$388.16 FOR DCNA 39 OVERCRAFT

* If motion changes policy, please indicate the section(s).

Intent: TO BE FULLY SELF SUPPORTING

Maker: MARVIN H

Seconded By: KIRBY M.

Pro: _____

Con: _____

MOTION IS TO BE BROUGHT BACK TO GROUPS TO BE VOTED ON -

YES _____
NO _____

Vote: 10 For 0 Against 0 Abstentions

Disposition of Motion: Carried _____ Defeated _____ Tabled _____

Motion referred to _____ committee, until _____

Other Rulings: _____