

NARCOTICS ANONYMOUS CONNECTICUT REGION
MOTION SHEET



Date: _____ Motion # _____

Motion: _____

Intent: _____

Name of maker: _____ Area/Comm: _____

2nd By: _____ Area/Comm: _____

Amendments or Dispositions by the
CTRSC: _____

Committed to: _____

TABLE TO AREA FOR 60 DAYS BY: _____

2nd BY: _____

VOTE: CCA: YEA NAY ABS GDA: YEA NAY ABS GHA: YEA NAY ABS

GNHA: YEA NAY ABS GWA: YEA NAY ABS MSUA: YEA NAY ABS

SFCA: YEA NAY ABS TVA: YEA NAY ABS USA: YEA NAY ABS

VOTE TOTAL: YEA _____ NAY _____ ABS _____

MOTION # _____ CARRIED YES [] NO []