OCEAN GATEWAY AREA SERVICE COMMITTEE MOTION FORM

OGASC DATE:		ASC NUMBER:	
MADE BY:		GROUP/SUBCOMM	MITTEE:
SECONDED BY:		GROUP:	
Motion Affects: (Amends policy numb Reviewed by Policy Foundation (Area Vice-Chair) Reviewed by Treasure (If applicable/motion)	acilitator:er:er:er: is related to the area's funds)	GROUP:	
INTENT (why): Make sure you say: Examples:			
1. WHO is to do so 2. WHAT they are If needed, also tell: 3. HOW they are 4. WHEN it is to 5. HOW MUCH it 6. WHY they are	to do it pe done will cost	"I move that the Counseling Cen "I move that the March ⁴ of each maximum impa	ne OGASC ¹ hold its meetings at the Salisbury Substance Abuse hter(SSACC) ² ne OGASC ¹ hold an annual Unity Day convention ² in February or year, hosted by the Special Events Subcommittee ³ , with a act to the ASC of \$1,000 ⁵ " helebrate unity in recovery"
For Chair/Policy Facilitator use only: Quorum: Motion Type:			
ADHOC Formed: Name & Phone Number of Chair: Motion Action: Called to a Vote:			
		per Against:	Number Abstain:
Number in F	Passed:	_	number Abstain:
		. ancar	_