Unity Area of Narcotics Anonymous
Motion Form

Date: _____

Maker: _____ Second: _____

Motion: _____

_____

_____

_____

_____

Intent: _____

_____

_____

_____

_____

Pros:

1. _____

_____

2. _____

_____

Cons:

1. _____

_____

2. _____

_____

Vote:

For: _____ Against: _____ Abstentions: _____

- ☐ Passed
- ☐ Failed
- ☐ Tabled
- ☐ Back to Groups
- ☐ Ruled out of Order by Chairperson

Narcotics Anonymous