Los Alamitos Unified Council

PTA

everychild. onevoice.

Motion Form

MEETING DATE: _____

MAKER OF THE MOTION: _____

COMMITTEE / POSITION: _____

I move _____

_____

_____

_____

_____

_____

_____

_____

_____

_____

FOR SECRETARY USE ONLY

Seconded By: _____ **Date Action Taken:** _____

Action:

☐ **Adopted** ☐ **Defeated** ☐ **Tabled** ☐ **Withdrawn**

☐ **Referred** ☐ **Referred to:** _____