TEXAS DIVISION SONS OF CONFEDERATE VETERANS
MOTION FORM
(Please print or write legibly)

Date _____

MOTION *(Print)* **I move to/that**

Made by: _____

Seconded by: YES _____ No_____ Motion Not Seconded/Failed_____

CIRCLE ALL THAT APPLY

Vote to Amend: Show of hands   Ballot   Standing   Standing Count

Amend motion: Adopted   Lost   Tabled   Withdrawn

I move to amend by

Made by: _____

Seconded by: YES_____ No_____ Motion Not Seconded/Failed_____

CIRCLE ALL THAT APPLY

Vote to Amend: Show of hands   Ballot   Standing   Standing Count

Amend motion: Adopted   Lost   Tabled   Withdrawn