

# Submission Of Motion



## DATE OF REQUEST

Submission Date: \_\_\_\_\_

## NAME OF MAIN MOTION MAKER

Membership must be current in both RID and IdahoRID to have voting rights. [Bylaws Art.III, §2]

Moved by: \_\_\_\_\_

Are you an IdahoRID member with voting rights?    Yes                      No

## NAME OF SECOND

Second person on your motion is not required.

Seconded by: \_\_\_\_\_

Seconder an IdahoRID member with voting rights?    Yes                      No

## MOTION

I move that...

## I MOVE THAT

State the action that you wish IdahoRID to take; be specific about who (board, committee, members etc.) If you are making typographical edits to existing bylaws, please include the document showing the original text, suggested edits, and a clean copy of the final version you wish to see.

What is the rationale for your motion?

## RATIONALE

Give the reason(s) why this action should be done.

Committees, portion of membership, or stakeholders who are affected:

## BYLAWS IMPACT

Indicate the article and section impacted. Explain how it is impacted. If there is no identified impact, state "none".

Estimated total cost to implement this motion, including both direct and indirect costs:

## FISCAL IMPACT

To the best of your ability, describe what costs will be incurred by IdahoRID if this action is taken, including any loss or increase of revenue, man-hours required, reallocation of resources, etc.

Summary of costs:

**Submit this form to the current IdahoRID secretary at [info@idahoRID.org](mailto:info@idahoRID.org) and keep a copy for yourself**

FOR IdahoRID USE ONLY:			
Date of Proposal _____	PASSED	FAILED	TABLED
Referred to _____			