

BOD Staff ONLY Motion No. ____

MAIN MOTION Submittal Form

This document must be filled out completed and printed legibly to be acceptable

Motions will be accepted on Friday, March 5th between 9am – 3pm. They may be hand delivered to the BOD Receptionist (3rd floor of admin.) or emailed to <u>bodofficestaff@tulaliptribes-nsn.gov</u>

Any motion pertaining personnel issues or unconstitutional subject matter will be invalid.

Motion Maker (Print Name)	Signature	Enrollment Number
Email Address	Telephone Number	
Mailing Address (Street or PO Box, City, St	rate, Zip Code)	
Motion (100 words or less)		

The Main Motion must have a Second

Enrollment Number

Page of _____

Continuous page for main motion (if applicable)
Duplicate page if more room is needed.

Motion Makers supporting statement on why they are FOR this motion *Duplicate page if more room is needed.*
