



ARABIAN HORSE ASSOCIATIONSM

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AHA 0205 (Rev. 1/21)

BOARD OF DIRECTORS MOTION FORM

MOTION # _____

Whereas,

Whereas,

Moved,

Effective:

SUBMITTED BY:

Committee/Commission/Board Name: _____

Total # Eligible to Vote: _____ Number of Yes Votes: _____ Number of No Votes: _____ Date Vote Was Taken: _____

How Vote Was Taken: Mail E-Mail Phone Meeting Zoom (Check One)
(Must have quorum with majority of yes votes.)

Where Documentation of this Vote is Recorded: _____ (Must have printed documentation on file.)

AHA FINANCIAL & BT/IT IMPACT STATEMENT:

(All motions presented to the Board of Directors must include a financial impact statement. Motion #38-8/12/00-BOD)

Motion By _____ Date _____

- | | | |
|---|--|-------|
| <input type="checkbox"/> Motion Passed | <input type="checkbox"/> Motion Passed Unanimously | |
| <input type="checkbox"/> Motion Defeated | <input type="checkbox"/> Motion Referred | _____ |
| <input type="checkbox"/> Motion Withdrawn | <input type="checkbox"/> Motion Postponed | _____ |