**AMENDMENT TO or ADDITION:**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  |  | PMHA Policy name: |  |  | Paragraph/Page # |  |
|  |  |  |  |  |  |  |
|  |  | Operations Manual & Section #  |  |  | Paragraph/Page # |  |
|  |  |  |  |  |  |  |
|  |  | Additional or New Item(s) being proposed?  |  |

|  |
| --- |
| Submission Information: |
| Submitted By: |  | Signed: |  | Date: |  |
| Seconded By: |  | Signed: |  | Date: |  |

Presently Reads:

Change/Proposed to Read:

 Rationale:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Date-Motion # | Withdrawn | Tabled | In Favor | Vote Against | Vote Abstained |
|  |  |  |  |  |  |
| Carried | Carried as Amended | Defeated | Authorized by/Board position |
|  |  |  |  |