Marquette Unitarian Universalist Congregation

Action Request Form

Name: _____ Date:_____

Description of need for Board of Trustees to discuss next meeting: _____

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Received by Date: _____

For Board Use Only:

BoT Discussed Date: _____

BoT Response to Request: Written: _Verbal: ____

By (Name): _____

Notes: _____

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(Completed and Resolved Action Forms to be kept in BoT files) Form created Feb. 2017