



New Jersey State First Aid Council, Inc.

EMS Council of New Jersey

2040 Millburn Avenue, Suite 102-1

Maplewood, New Jersey 07040



## Motion

Date:

Motion:

Rationale:

Motion made by:

Name

Office

Signature

Motion seconded by:

Name

Office

Signature

Yes \_\_\_\_\_

No \_\_\_\_\_

Abstain \_\_\_\_\_

Accepted \_\_\_\_

Rejected \_\_\_\_

Secretary: \_\_\_\_\_

Followup: