



## 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: