

# A m e n d m e n t F o r m

Constitution Amendment Article # \_\_\_\_\_

Bylaw Amendment Bylaw # \_\_\_\_\_

✓ The CB&R Committee will be meeting in the week following the January deadline. In the event that the committee requires clarification, please provide a contact name and phone number.

Contact Name \_\_\_\_\_ Phone # \_\_\_\_\_

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**MUST HAVE TWO SIGNATURES TO BE CONSIDERED**

**Submitted by** \_\_\_\_\_  
(Signature of person and Local #) Print Name

**Seconded by** \_\_\_\_\_  
(Signature of person and Local #) Print Name

**Submitted on behalf of (if applicable)**

Board of Directors

Committee Committee Name \_\_\_\_\_

SUN District Council District Name \_\_\_\_\_

Local