

AGM Business Resolution Form



Whereas (describe the issue or concern)

Be it resolved that (describe action or recommendation)

Moved by:

Name (please print)	Member #
Signature	Date

Seconded by: (see reverse)	ABCFP Office Use Only:
	Date Received: _____
	Resolution #: _____
	Outcome: _____

Seconded by: (must be seconded by 10 registered members)

1. _____
Name (please print) Member #

Signature

2. _____
Name (please print) Member #

Signature

3. _____
Name (please print) Member #

Signature

4. _____
Name (please print) Member #

Signature

5. _____
Name (please print) Member #

Signature

6. _____
Name (please print) Member #

Signature

7. _____
Name (please print) Member #

Signature

8. _____
Name (please print) Member #

Signature

9. _____
Name (please print) Member #

Signature

10. _____
Name (please print) Member #

Signature

Return this completed form by mail, fax or e-mail to:
Association of BC Forest Professionals, 330 - 321 Water Street, Vancouver, BC V6B 1B8 Fax: 604.687.3264 E-mail: abrittain@abcfp.ca