AMERICAN LEGION AUXILIARY DEPARTMENT OF NEBRASKA **AMENDMENT** Office only: Proposal #____ Date Submitted: _____ Check one box Constitution Bylaws ☐Standing Rules Description and Location: (Type the name of Recommendation here and where it is located in your current Constitution, Bylaws, Standing Rules) **Proposed Amendment** If Adopted, Will Read Rationale **Current Wording** [Type in how the [Enter a draft of the Enter here exactly [Type the current wording with "how" the wording will reason/rationale for the wording looks now] changes inserted (and look if the change is amendment] noted) and/or info that adopted] will be stricken] Proposed by: [Enter the name of the person/committee who is proposing the amendment] [Enter Optional Information below] Rationale: [Enter further Rationale for the change] Consequential amendments: [Note any amendments that will be affected if the proposed change is adopted] Routing: Decided by the Resolutions Committee i.e. Finance, Membership, Advisory etc. Committee Chairman: Name(s): **Signature** Recommend □ Not Recommend □ Recommend with Amendment □ Recommend Not Recommend Recommend with Amendment <u>Signature</u> Signature Recommend □ Not Recommend □ Recommend with Amendment □ Date___ Final Action: Approved Rejected