Resolution Submission: Form 1

Due Date Reminder: August 30, 2019



Given the anticipated time constraints of this Diocesan Convention, it is requested that only resolutions considered essential to the conduct of business for the upcoming year be submitted for vote at this Diocesan Convention.

The Resolutions Committee has been requested by the President of Convention to identify no more than <u>five (5)</u> resolutions to be considered by the Diocesan Convention other than those on the consent calendar, on the Bishop's address, on matters of courtesy, or on constitutional or canonical matters. Resolutions from the floor may still be submitted at the formation of Diocesan Convention, provided all House Rules are followed.

Resolutions must be received by the Office of the Bishop by **August 30, 2019** and should be sent via e-mail to Leta Parks, Chair of Resolutions, at **parksleta@gmail.com**.

Resolution Title:		
Proposed By:		
Name:	Please mark one: Clergy	Lay 🗌
Phone: Please include area code	Email:	
Congregation:		
***************	******************	********
Name:	Please mark one: Clergy	Lay 🗌
Phone: Please include area code	Email:	
Congregation:	City of Congregation:	
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Name:	Please mark one: Clergy	Lay 🗌
Phone: Please include area code	Email:	
Congregation:	City of Congregation:	
***************	******************	********
Name:	Please mark one: Clergy	Lay 🗌
Phone: Please include area code	Email:	
Congregation:	City of Congregation:	
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* If more than four people propose this Resolution, please continue on Page 2. <u>If not</u>, please continue on Page 3.

2019 Diocesan Convention: November 7-9, 2019 Resolution Submission Form 1

City of Congregation:

Page 2 of 3 **Proposed By (Continued):** Name: Please mark one: Clergy Lav Phone: Please include area code Email: _____ Congregation: City of Congregation: Name: Please mark one: Clergy Email: ____ Phone: Please include area code Congregation: City of Congregation: Name: Please mark one: Clergy Lav Phone: Email: Please include area code Congregation: City of Congregation: Name: Please mark one: Clergy Phone: Please include area code Email: _____ Congregation: _____ City of Congregation: ____ Name: Please mark one: Clergy Email: _____ Please include area code Congregation: City of Congregation: Name: Please mark one: Clergy Lay 🔲 Phone: Email:

Please include area code

Congregation:

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Representative Information: Name: ______ Please mark one: Clergy ____ Lay ___ Phone: ______ Email: ______ Please include area code Address: ______ City: _____ State: _____ California ____ Zip Code: ______ Congregation: _____ City of Congregation: ______ Representative at Diocesan Convention (if different from Representative Information above): Name: ______ Please mark one: Clergy _____ Lay ___ Phone: ______ Please include area code Congregation: _____ City of Congregation: ______



TITLE:	OF NORTHERN CALIFORNIA
PROPOSED BY:	
NAME OF REPRESENTATIVE:	
REPRESENTATIVE AT CONVENTION:	
DATE:	
RESOLUTION:	
RESOLVED, That	
EXPLANATION OF RESOLUTION:	
FISCAL IMPACT:	
FISCAL IMPACT:	
RELATION TO DIOCESAN STRATEGIC PRIORITIES:	