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MA RULE CHANGE REQUEST FORM

All fields on this form must be completed in full to ensure your rule change proposal is able to be considered

Submitted By (Name):	MA OFFICE USE ONLY
Submitted By (Email):	Received:
Effected Discipline:	Agenda Reference:
Existing Rule Number:	
Existing Rule:	
Proposed Rule Number:	
Proposed Rule:	
Rationale:	