ECAF: RECEIVED:

## MOTION ASSIGNMENT SLIP

TO: Clerk of the Council	
TITLE OF PROPOSED MOTION:	
Clerk's Action:	Proposed Motion No
Assigned to:	Date:
	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
STANDING COMMITTEE RECOMMENDATION FORM	
On, the Cor	mmittee made the following recommendation:
Move to Council for action of	on:
Move to Council as revised	for action on:
Other	
Consent Agenda Regula	ar Agenda Administrative Matters

Committee Chair

at

Public Hearing Date \_\_\_\_\_