

ECAF:
RECEIVED:

MOTION ASSIGNMENT SLIP

TO: Clerk of the Council

TITLE OF PROPOSED MOTION:

Clerk's Action: Proposed Motion No. _____

Assigned to: _____ Date: _____

10/7/25 Re-assigned to Committee of the Whole

~~~~~  
**STANDING COMMITTEE RECOMMENDATION FORM**

On 10/7/2025, the Committee made the following recommendation:

Move to Council for action on: 10/8/2025 GLS

Move to Council as revised for action on: \_\_\_\_\_

Other \_\_\_\_\_

Consent Agenda  Regular Agenda  Administrative Matters

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

  
\_\_\_\_\_  
Committee Chair