

ECAF:
RECEIVED:

BUDGET MOTION ASSIGNMENT SLIP

TO: Clerk of the Council

TITLE OF PROPOSED BUDGET MOTION:

Clerk's Action: Proposed Budget Motion No. _____

Assigned to: _____ Date: _____

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**STANDING COMMITTEE RECOMMENDATION FORM**


On \_\_\_\_\_, the Committee made the following recommendation:

**Set time and date for Public Hearings on:**

\_\_\_\_\_ **at** \_\_\_\_\_ **and** \_\_\_\_\_

**Continued to:** \_\_\_\_\_ **at** \_\_\_\_\_

\_\_\_\_\_ Other \_\_\_\_\_

  
\_\_\_\_\_  
Council Chair