ECAF: RECEIVED:

## MOTION ASSIGNMENT SLIP

TO: C	Clerk of the Council	
TITLE OF PROPOSED MOTION:		
Clerk's	Action:	Proposed Motion No
Assigne	ed to:	Date:
		~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
		E RECOMMENDATION FORM
On	, the Comm	ittee made the following recommendation:
	Move to Council for action on:	
Move to Council as revised for action on:		
	more to coarion as revised for	

Committee Chair

Consent Agenda \_\_\_\_\_ Regular Agenda \_\_\_\_ Administrative Matters \_\_\_\_

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