ECAF: RECEIVED:

MOTION ASSIGNMENT SLIP

TO: Clerk of the Counci	I
TITLE OF PROPOSED MOTION:	
Clerk's Action:	Proposed Motion No
Assigned to:	Date:
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STANDING COMMITTEE RECOMMENDATION FORM	
On,	the Committee made the following recommendation:
Move to Council for action on:	
Move to Council as revised for action on:	

Consent Agenda _____ Regular Agenda ____ Administrative Matters ____

Public Hearing Date _____at

Committee Vice-Chair