ECAF: RECEIVED:

MOTION ASSIGNMENT SLIP

TO: Clerk of the Council TITLE OF PROPOSED MOTION: Clerk's Action: Proposed Motion No._____ Assigned to: ______ Date: _____ **RE-ASSIGNED TO COMMITTEE OF THE WHOLE - 4/22/2025 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: _____ _____Other _____ Consent Agenda Regular Agenda Administrative Matters Public Hearing Date _____at

Committee Chair