## ECAF NO.: ECAF RECEIVED:

## MOTION ASSIGNMENT SLIP

TO:	Clerk of the Counc	cil		
TITLE (	OF PROPOSED M	IOTION:		
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Clerk's Action:		Proposed Motion No		
Assigned to:			Date:	
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S	TANDING CO	MMITTEE RECOMN	MENDATION FORM	
On		_, the Committee made the	following recommendation:	
	Move to Counci	l for action on:		
	Move to Counci	l as amended for action on:		
	Move to Counci	l with no recommendation		
(Consent		_should not be placed on the d for routine items that do not receislative Session)		
This ite		_	Administrative Matters Agenda on to set time and date for public	
hearings)	)		n/m	
		Committee Cl	hair	