

**CITY OF EL PASO, TEXAS
AGENDA ITEM
DEPARTMENT HEAD'S SUMMARY FORM**



DEPARTMENT: Office of the Comptroller

AGENDA DATE: 3/18/25

PUBLIC HEARING DATE:

CONTACT PERSON NAME: Margarita Marin

PHONE NUMBER: 915-212-1174

2nd CONTACT PERSON NAME:

PHONE NUMBER:

DISTRICT(S) AFFECTED: All

STRATEGIC GOAL:

6. Set the Standard for Sound Governance and Fiscal Management

SUBGOAL:

6.6 Ensure continued financial stability and accountability through sound financial management, budgeting and reporting

SUBJECT:

That the City Manager be authorized to execute a Management Services Agreement by and between the City and the Camino Real Regional Mobility (CRRMA) and any related documents necessary, whereby the City shall provide various management services to the CRRMA.

BACKGROUND / DISCUSSION:

The City of El Paso (City) created the Camino Real Regional Mobility Authority (CRRMA) by City Council Resolution of March 13, 2007 in order to directly benefit the State of Texas, the City and the traveling public through the improvement of the State's transportation system in and around the City of El Paso. Upon its creation, the CRRMA engaged the City to provide initial management services and other assistance to the CRRMA, including by way of example, the provision of an Executive Director, office space, IT and communications services. The provision of such management services allowed the CRRMA to rely on the resources of the City, thereby allowing for the CRRMA to immediately focus on the improvement of the region's transportation system through the development of major transportation projects, rather than devoting time and effort on administrative, management and associated activities normally required of newly created agencies.

Accounting and investment services performed by the City on behalf of the CRRMA will be compensated by CRRMA not to exceed \$45,000 annually.

COMMUNITY AND STAKEHOLDER OUTREACH:

None

PRIOR COUNCIL ACTION:

Last Council action was on March 3, 2020.

AMOUNT AND SOURCE OF FUNDING:

Between \$1 - 45,000

1000 - 210- 13130 - 405067

REPORTING OF CONTRIBUTION OR DONATION TO CITY COUNCIL:

None

NAME	AMOUNT (\$)

*****REQUIRED AUTHORIZATION*****



DEPARTMENT HEAD: _____

(If Department Head Summary Form is initiated by Purchasing, client department should sign also)