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

DEPARTMENT:		
AGENDA DATE:		
PUBLIC HEARING DATE:		
CONTACT PERSON NAME:	PHONE NUMBER:	
DISTRICT(S) AFFECTED:		
STRATEGIC GOAL:		
SUBGOAL:		
SUBJECT:		
BACKGROUND / DISCUSSION:		
COMMUNITY AND STAKEHOLDER OUTREACH:		
PRIOR COUNCIL ACTION:		
AMOUNT AND SOURCE OF FUNDING:		
REPORTING OF CONTRIBUTION OR DONATION TO CITY	COUNCIL:	
NAME	AMOUNT (\$)	

DEPARTMENT HEAD:		
(If Department Head Summary Form is initiated by Purchasing, client department should		

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