

**CITY OF EL PASO, TEXAS  
AGENDA ITEM  
AGENDA SUMMARY FORM**

**DEPARTMENT:**

*Mayor and City Council*

**AGENDA DATE:**

*June 20, 2023*

**CONTACT PERSON NAME AND PHONE NUMBER:**

*City Representative Brian Kennedy, 915.212.0001*

**DISTRICT(S) AFFECTED:**

*All Districts*

**STRATEGIC GOAL:**

*Goal 2 Set the Standard for A Safe & Secure City*

**SUBJECT:**

**APPROVE** a resolution / ordinance / lease to do what? **OR AUTHORIZE** the City Manager to do what? Be descriptive of what we want Council to approve. Include \$ amount if applicable.

*Discussion and Action regarding proposed amendments to the Emergency and Transfer Ambulance Services (Title9)*

**BACKGROUND / DISCUSSION:**

Discussion of the what, why, where, when, and how to enable Council to have reasonably complete description of the contemplated action. This should include attachment of bid tabulation, or ordinance or resolution if appropriate. What are the benefits to the City of this action? What are the citizen concerns?

*N/A*

**PRIOR COUNCIL ACTION:**

Has the Council previously considered this item or a closely related one?

*N/A*

**AMOUNT AND SOURCE OF FUNDING:**

How will this item be funded? Has the item been budgeted? If so, identify funding source by account numbers and description of account. Does it require a budget transfer?

*N/A*

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\*\*\*\*\*REQUIRED AUTHORIZATION\*\*\*\*\*