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



**DEPARTMENT:** 

AGENDA DATE:

CONTACT PERSON NAME

PHONE NUMBER:

DISTRICT(S) AFFECTED:

STRATEGIC GOAL:

SUBGOAL:

SUBJECT:

## COMMUNITY AND STAKEHOLDER OUTREACH:

## **REPORTING OF CONTRIBUTION OR DONATION TO CITY COUNCIL:**

NAME	AMOUNT (\$)	DATE

## **BACKGROUND / DISCUSSION:**

**PRIOR COUNCIL ACTION:** 

AMOUNT AND SOURCE OF FUNDING: