

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

**DEPARTMENT:** Mayor and Council

**AGENDA DATE:** November 8, 2021

**CONTACT PERSON NAME AND PHONE NUMBER:** City Rep Henry Rivera, District 7- 915.212.0007

**DISTRICT(S) AFFECTED:** All Districts

**STRATEGIC GOAL:** 6: Set the Standard for Sound Governance and Fiscal Management

**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.**

For Notation Only: Formal Report of the Financial Oversight and Audit Committee meeting held on October 21, 2021.

1. Discussion and Action on FY 2020-2021 Audit Plan 4th Quarter Updates
  - Motion made by Representative Hernandez, seconded by Representative Salcido and approved by Representative Rivera, Representative Hernandez, Representative Lizarraga and Representative Salcido to accept the 4th Quarter Update.
2. Discussion and Action on the FY2021-2022 Annual Internal Audit Plan
  - Motion made by Representative Hernandez, seconded by Representative Lizarraga and approved by Representative Rivera, Representative Hernandez, Representative Lizarraga and Representative Salcido add the Street Resurfacing Audit to the FY 2021-2022 Annual Internal Audit Plan.
  - Motion made by Representative Hernandez, seconded by Representative Salcido and approved by Representative Rivera, Representative Hernandez, Representative Lizarraga and Representative Salcido to bring to approve the FY 2021-2022 Annual Internal Audit Plan.
3. Discussion on Client Surveys.

**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?** This item is to brief Council on the 4<sup>th</sup> Quarter FOAC Meeting.

**PRIOR COUNCIL ACTION:**

**Has the Council previously considered this item or a closely related one?** Yes, Council gets briefed after every FOAC Meeting.

**AMOUNT AND SOURCE OF FUNDING:**

**How will this item be funded? N/A Has the item been budgeted? N/A 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\*\*\*\*\*