



Legislation Details (With Text)

**File #:** 21-171      **Version:** 2      **Name:**

**Type:** Minutes      **Status:** Agenda Ready

**File created:** 2/3/2021      **In control:** City Council

**On agenda:** 2/16/2021      **Final action:**

**Title:** Approval of Minutes of the Regular City Council Meeting of February 2, 2021, the Agenda Review Meeting of February 1, 2021, the Special Meeting of December 21, 2020, and the corrected Minutes for the Regular City Council Meeting of January 19, 2021.

**Sponsors:**

**Indexes:**

**Code sections:**

**Attachments:** 1. 02162101 02-01-2021 Agenda Review Minutes.pdf, 2. 02162101 12-21-20 Special Meeting Minutes.pdf, 3. 02162101 01-19-2021 Regular City Council Meeting Minutes CORRECTED.pdf, 4. 02162101 02-02-2021 Regular City Council Meeting Minutes

Date	Ver.	Action By	Action	Result
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**CITY OF EL PASO, TEXAS  
AGENDA ITEM SUMMARY FORM**

**All Districts**

City Clerk's Office, Laura D. Prine, (915) 212-0049

**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.*

Approval of Minutes of the Regular City Council Meeting of February 2, 2021, the Agenda Review Meeting of February 1, 2021, the Special Meeting of December 21, 2020, and the corrected Minutes for the Regular City Council Meeting of January 19, 2021.

**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?*

Click or tap here to enter text.

**PRIOR COUNCIL ACTION:**

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

Click or tap here to enter text.

**AMOUNT AND SOURCE OF FUNDING:**

*How will this item be funded? Has the item been budgeted? If so, identify funding source by amount numbers and description of*

*account. Does it require a budget transfer?*  
Click or tap here to enter text.

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

**Department Head:**

*If Agenda Item Summary Form is initiated by Purchasing, client department should sign also*