



Legislation Details (With Text)

**File #:** 20-1      **Version:** 2      **Name:**  
**Type:** Minutes      **Status:** Agenda Ready  
**File created:** 12/7/2020      **In control:** City Council  
**On agenda:** 12/15/2020      **Final action:**  
**Title:** Approval of Minutes of the Regular City Council Meeting of December 8, 2020, the Agenda Review Meeting of December 7, 2020, the Work Session of October 12, 2020, and the Work Session of December 7, 2020.

**Sponsors:**

**Indexes:**

**Code sections:**

**Attachments:** 1. 12152001 10-12-2020 Work Session Meeting Minutes, 2. 12152001 12-07-2020 Agenda Review Minutes, 3. 12152001 12-07-2020 Work Session Minutes, 4. 12152001 12-08-2020 Regular City Council Meeting Minutes

Date	Ver.	Action By	Action	Result
12/15/2020	2	City Council		

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

**All Districts**

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

**PUBLIC HEARING DATE:** Click or tap to enter a date.

**STRATEGIC GOAL:**

**Goal 6 - Set the Standard for Sound Governance and Fiscal Management**

**SUBGOAL:** Choose an item.

**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 December 8, 2020, the Agenda Review Meeting of December 7, 2020, the Work Session of October 12, 2020, and the Work Session of December 7, 2020.

**BACKGROUND / DISCUSSION:**

*Discussion of the what, why, where, when, and how to enable Council to have reasonably complete description of he 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*