## Legislation Details (With Text)

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| **File #:** | 21-70 **Version:** 1 | **Name:** |
| **Type:** | Other Business | **Status:** Agenda Ready |
| **File created:** | 1/12/2021 | **In control:** City Council |
| **On agenda:** | 1/19/2021 | **Final action:** |
| **Title:** | Discussion and action on a Resolution to authorize the City Manager or a designee to enter into contracts and amendments to contracts to carry out the 2021 Public Art Plan. | |
| **Sponsors:** | | |
| **Indexes:** | | |
| **Code sections:** | | |
| **Attachments:** | 1. 43 21-70 CONTRACTS TO CARRY OUT THE 2021 PUBLIC ART PLAN, 2. 43 | |

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

## All Districts

Museums & Cultural Affairs, Ben Fyffe, (915) 212-1766

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

**STRATEGIC GOAL:**
Choose an item.

**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.*

Discussion and action on a Resolution to authorize the City Manager or a designee to enter into contracts and amendments to contracts to carry out the 2021 Public Art Plan.

**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***