Agenda Item Form

Agenda Date: 08/24/04

Districts Affected: 5
Dept. Head/Contact Information: Mayor & Council, Jim Martinez, (915) 541-4145

Type of Agenda Item:

- ☐ Resolution
- ☐ Tax Installment Agreements
- ☐ RFP/ BID/ Best Value Procurement
- ☐ Application for Facility Use
- ☐ Interlocal Agreements
- ☐ Other _____
- ☒ Staffing Table Changes
- ☐ Tax Refunds
- ☐ Budget Transfer
- ☐ Bldg. Permits/Inspection
- ☐ Contract/Lease Agreement
- ☐ Board Appointments
- ☐ Donations
- ☐ Item Placed by Citizen
- ☐ Introduction of Ordinance
- ☐ Grant Application

Funding Source:

- ☒ General Fund
- ☐ Grant (duration of funds: _____ Months)
- ☐ Other Source: _____

Legal:

☐ Legal Review Required Attorney Assigned (please scroll down): None ☐ Approved ☐ Denied

Timeline Priority: ☐ High ☐ Medium ☐ Low # of days:_____

Why is this item necessary:
Position existed to assist Rep. Dan Power in running his district. Effective with his resignation the position is no longer needed.

Explain Costs, including ongoing maintenance and operating expenditures, or Cost Savings:
N/A

Statutory or Citizen Concerns:
None anticipated

Departmental Concerns:
None ancitipated

DATE: 10/22/03

CITY OF EL PASO

STAFFING TABLE CHANGE REQUEST

Date sent to City Council: _____

INITIALS 2004-86

Date sent to Personnel: _____

DEPARTMENT NAME:	(1) HR DEPARTMENT ID	(2) ATTACHED DOCUMENTATION	REQUESTED EFFECTIVE DATE:
Mayor & Council	01	☐ Description of Duties ☐ Organization Chart	August 25, 2004

A=add
D=delete (3) (4) (5) (6) ACTIONS *-Position Type *R/T/C = Regular, Temporary, Contract *L/U = Classified, Unclassified

A/D	# OF POS	Max Head Count	Business Unit	ACCOUNT DESCRIPTION and ACCOUNT CODE Fin. Dept. ID-Fund-Fin. Loc. Proj. or Grnt. (00000000-00000-00000PorG0000)	JOB CODE	JOB CLASS TITLE	PLAN / GRADE	R/T/C	L/U
D	1	1	COFEP	01010005-01101-01001	1535	Administrative Assistant	GS / 23	R	L
			COFEP						
			COFEP						
			COFEP						
			COFEP						
			COFEP						
			COFEP						

AUG 18 '04 AM 11:27

(7) Purpose: ☒ Streamline ☐ Expanded Program ☐ New Program ☐ New Facility ☐ Other (Explain)

(8) STATEMENT OF NEED / CONSEQUENCES OF NOT APPROVING ACTION(S): This position existed to assist Representative Dan Power in running his district. Effective with his resignation the positon is no longer needed.

ANTICIPATED IMPACT ON:

(9) DEPARTMENT ORGANIZATION/OPERATIONS	(10) DEPARTMENT BUDGET

(11) DEPARTMENT HEAD SIGNATURE: DATE:	BUDGET CHANGE ☐ Required ☐ Attached	AMOUNT ADDITIONAL FUNDS

PERSONNEL DEPARTMENT RECOMMENDATION

	COMMENTS	PERSONNEL DIRECTOR	DATE
☒ Requested CC and CG is Appropriate 8-18-04 ☐ Change Class To ☐ Change Grade To		Jerry Bond	8/18/04

O.M.B RECOMMENDATION / C.A.O. APPROVAL

COMMENTS: Irene R Hernandez 8/18/04 ok! David A Ronstadt 8-19-04

RECOMMENDATION	CHIEF FINANCIAL OFFICER	CHIEF ADMINISTRATIVE OFFICER
☐ Position(s) Recommended ☐ Position(s) Not Recommended	8/19/04	

APPROVED: _____
DATE

F-STCR2.DA 10/2/2001