

DATE: 08/20/20

TO: City Clerk

FROM: Mayor Dee Margo

ADDRESS: 300 N. Campbell, 2<sup>nd</sup> Floor TELEPHONE (915) 212-0021

Please place the following item on the (Check one): CONSENT X REGULAR \_\_\_\_\_

Agenda for the Council Meeting of 09/01/2020  
Re-Appointment of Tami Keating to the Tax Increment Reinvestment Zone Number Five by  
Item should read as follows: Mayor Dee Margo.

**BOARD COMMITTEE/COMMISSION APPOINTMENT/REAPPOINTMENT FORM**

NAME OF BOARD/COMMITTEE/COMMISSION: Tax Increment Reinvestment Zone Number Five

NOMINATED BY: Dee Margo DISTRICT: Mayor

NAME OF APPOINTEE Tami Keating  
(Please verify correct spelling of name)

E-MAIL ADDRESS: \_\_\_\_\_

BUSINESS ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ ST: TX ZIP: \_\_\_\_\_ HOME \_\_\_\_\_ PHONE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ ST: TX ZIP: \_\_\_\_\_ PHONE: \_\_\_\_\_

DOES THE PROPOSED APPOINTEE HAVE A RELATIVE WORKING FOR THE CITY? YES: \_\_\_\_\_ NO X

IF SO, PLEASE PROVIDE HIS OR HER NAME, CITY POSITION AND RELATIONSHIP TO THE PROPOSED APPOINTEE: N/A

HAS APPOINTEE BEEN A MEMBER OF OTHER CITY BOARDS/COMMISSIONS/COMMITTEES? IF SO, PLEASE PROVIDE NAMES AND DATES:

LIST ALL REAL ESTATE OWNED BY APPOINTEE IN EL PASO COUNTY (BY ADDRESS):

WHO WAS THE LAST PERSON TO HAVE HELD THIS POSITION BEFORE IT BECAME VACANT?

NAME OF INCUMBENT: Tami Keating

EXPIRATION DATE OF INCUMBENT: 04/30/2020

REASON PERSON IS NO LONGER IN OFFICE (CHECK ONE): TERM EXPIRED: X  
RESIGNED \_\_\_\_\_  
REMOVED \_\_\_\_\_

DATE OF APPOINTMENT: 09/01/2020

TERM BEGINS ON : 04/30/2020

EXPIRATION DATE OF NEW APPOINTEE: 04/30/2022

PLEASE CHECK ONE OF THE FOLLOWING: 1<sup>st</sup> TERM: \_\_\_\_\_  
2<sup>nd</sup> TERM: X  
UNEXPIRED TERM: \_\_\_\_\_