ORDINANCE/RESOLUTION REQUEST**Please submit to Mayor's Legislative Team by 5 pm Wednesday

1.	Serving meals at the Denver Rescue Mission.
2.	Requesting Agency:
3.	Contact Person with actual knowledge of proposed ordinance Name: Phone: Email:
4.	Contact Person with actual knowledge of proposed ordinance who will present the item at Mayor Council and who will be available for first and second reading, if necessary Name: Phone: Email:
5.	Describe the proposed ordinance, including what the proposed ordinance is intended to accomplish, who's involved
6.	Is there any controversy surrounding this ordinance, groups or individuals who may have concerns about it? Please explain.
(C	ompleted by Mayor's Office):Ordinance Request Number: Date: