

ORDINANCE/RESOLUTION REQUEST

Please email requests to the Mayor's Legislative Team
at MileHighOrdinance@DenverGov.org by **3:00pm on Monday**.

All fields must be completed.

Incomplete request forms will be returned to sender which may cause a delay in processing.

Date of Request: **October 2, 2014**

Please mark one: Bill Request or Resolution Request

1. Has your agency submitted this request in the last 12 months?

Yes No

If yes, please explain:

2. Title: *(Include a concise, one sentence description – please include name of company or contractor and contract control number - that clearly indicates the type of request: grant acceptance, contract execution, amendment, municipal code change, supplemental request, etc.)*

To approve the Mayoral appointment of Sarah Kurz to the Denver Commission on Cultural Affairs for terms effective immediately and expiring on August 31, 2016 or until a successor is duly appointed.

3. Requesting Agency: Mayor's Office

4. Contact Person: *(With actual knowledge of proposed ordinance/resolution.)*

- **Name:** Anthony Aragon
- **Phone:** 720-865-9032
- **Email:** anthony.aragon@denvergov.org

5. Contact Person: *(With actual knowledge of proposed ordinance/resolution who will present the item at Mayor-Council and who will be available for first and second reading, if necessary.)*

- **Name:** Anthony Aragon
- **Phone:** 720-865-9032
- **Email:** anthony.aragon@denvergov.org

6. General description of proposed ordinance including contract scope of work if applicable:

[Insert general description here.]

****Please complete the following fields:** *(Incomplete fields may result in a delay in processing. If a field is not applicable, please enter N/A for that field – please do not leave blank.)*

- a. **Contract Control Number:**
- b. **Duration:** Terms effective immediately and expiring August 31, 2016.
- c. **Location:**
- d. **Affected Council District:**
- e. **Benefits:**
- f. **Costs:**

7. Is there any controversy surrounding this ordinance? (Groups or individuals who may have concerns about it?) Please explain.

[Start typing here.]

To be completed by Mayor's Legislative Team:

SIRE Tracking Number: _____

Date Entered: _____

Boards and Commissions - Applicant Information

Printed Date: 12-12-2014

Prefix: UNDECLARED Last Name: KURZ First Name: SARAH Middle Name:

Applicant/Appointee Record Id: 4038 Date Last Modified: December-12-2014 08:54:31 AM MST App Deleted Flag:

Occupation: VICE PRESIDENT OF COMMUNICATIONS & POLICY

Employer: LIVEWELL COLORADO

Work Email:

Work Address:

Work City: Work State: CO Work Zip: Work Zip Ext:

Work Phone: Work Phone Ext: Work Fax: Work Cell Phone:

Home Email: SARAH.KURZ@DENVERGOV.ORG

Home Address: 9062 E. 29TH PLACE

Home City: DENVER Home State: CO Home Zip: 80238 Home Zip Ext:

Home Phone: Home Cell Phone: 303-818-3347

Birth Date: July-04-2776 12:00:0 Gender: FEMALE Ethnicity: CAUCASIAN GLBT: UNDECLARED

City Council District: 11 City Council Other:

Registered Voter: YES Registered County: DENVER Political Affiliation: UNDECLARED

Education Level: Year Completed:

Experience: UNDECLARED Interest: UNDECLARED Confidence: UNDECLARED

Confidence Extension:

City Employed: YES Date Submitted: November-03-2014 12:14:46 PM MST

Boards Applying For:

DENVER COMMISSION ON CULTURAL AFFAIRS

References

Reference 1: First Name: Last Name: Phone:

Reference 2: First Name: Last Name: Phone:

Reference 3: First Name: Last Name: Phone:

Skills, Activities, Memberships, Resume/Cover Letter:

Board Assignment Information:

Relation Id: 5353 BoardName: DENVER COMMISSION ON CULTURAL AFFAIRS Delete Flag: N

Status: MEMBER Reason: APPOINTED Start Date: 07-01-2013 End Date: NONE Tech Date: NONE

Resolution: Addendum: EX-OFFICIO