

**ORDINANCE/RESOLUTION REQUEST**

Please email requests to the Mayor's Legislative Team  
at [MileHighOrdinance@DenverGov.org](mailto:MileHighOrdinance@DenverGov.org) by NOON on Wednesday.

*\*All fields must be completed.\*  
Incomplete request forms will be returned to sender which may cause a delay in processing.*

Date of Request: December 6, 2010

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 - 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.)

Approve the following appointments of Elizabeth Horn and Monique Hernandez to the Welfare Reform Board for a term effective immediately and expiring January 1, 2014 and Fran Coleman to the Welfare Reform Board for a term effective immediately and expiring January 1, 2012.

3. **Requesting Agency:** Mayor's Office

4. **Contact Person:** (with actual knowledge of proposed ordinance)

- **Name:** Suzan Moore
- **Phone:** 720-865-9034
- **Email:** Suzan.Moore@denvergov.org

5. **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:** Suzan Moore
- **Phone:** 720-865-9034
- **Email:** Suzan.Moore@denvergov.org

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

*Please include the following:*

- a. **Duration:** Two terms begins immediately and expires January 1, 2014, one expires January 1, 2012
- b. **Location:**
- c. **Affected Council District:**
- d. **Benefits:**
- e. **Costs:**

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

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*To be completed by Mayor's Legislative Team:*

SIRE Tracking Number: \_\_\_\_\_

Date: \_\_\_\_\_

Ordinance Request Number: \_\_\_\_\_

Date: \_\_\_\_\_