

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: September 18, 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 Deidre Frain to the Denver GLBT Commission for a term effective immediately and expiring May 1, 2015 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:** Term effective immediately and expiring May 1, 2015
- 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.*

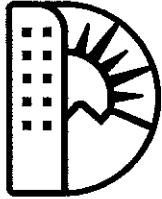
[Start typing here.]

To be completed by Mayor's Legislative Team:

SIRE Tracking Number: _____

Date Entered: _____

BOARDS AND COMMISSIONS APPLICATION



DENVER THE MILE HIGH CITY

Please complete the following information in full and return with your current resume or biography to the address below.

Type or print in blue or black ink.

Board or Commission you are applying for: GLBT Commission

Last Name: FRAIN First Name: Deidre (Dede)

Occupation/Employer: SELF EMPLOYED

Work Address: 4435 STUART ST City: Denver Zip: 80212

Work E-mail Address: dede.frain@gmail.com

Work Phone: 303-475-4620 Work/Home Fax:

Home Address: 4435 STUART ST City: DENVER Zip: 80212

Home Phone: 303-475-4620 Cell Phone/ Pager: SAME

Home E-mail Address: dede.frain@gmail.com

Are you a registered voter? (Yes) No If so, what county? DENVER

Colorado ID or Driver's License Number: 92-074-4571

Denver City Council District No.: 1 Ethnicity CAUCASIAN

Highest Level of Education or Degree Earned: GRADUATE - MASTERS Year Completed: 1979

Memberships/ Organizations/ Volunteer Activities (include past or present):

HRC Dinner Comm. Hc-CHAIR MEDIA, TABLE CAPTAINS
Pridefest Sponsor - 5 yrs, Alexander FOUNDATION
womyns Circle "The Center", ONE COLO ALLY AWARDS SPONSOR

References (List three persons, not related to you, whom you have known at least one year):

Table with 3 columns: Name, Address, Phone Number. Rows include Anthony Aragon (720-865-9032), ROBIN KNEIECH (City Council), and Rachel CHAPARRO.

Special Information:

Is there anything that would adversely affect public confidence in your appointment or service? Yes No
If yes, please explain on a separate sheet of paper.

Hi Anthony, Signature: Deidre Fra Date: 8/1/14

Return Completed Form to: Anthony R. Aragon, Director of Boards and Commissions
1437 Bannock Street, Room 350
Denver, CO 80202 Phone: (720) 865-9032 Fax: (720) 865-8787
anthony.aragon@denvergov.org

