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 Requ	est: March 6, 2015
Ple	ease mark one:	☐ Bill Request	or	X	Resolution Rec	quest	
1.	Has your agency su	bmitted this request in	the last 1	2 month	s?		
	☐ Yes	XX No					
	If yes, please ex	xplain:					
2.		es the type of request: g				mpany or contractor and contr , amendment, municipal code (
	To approve the I 9 th Avenue Busi	Mayoral appointments on the management of the ma	of John Bru rict Board o	ino, Frank of Directo	k Cannon, Mark ors for a term eff	Falcone, Patrick Heck and Jer fective immediately and expirin	my Robinson to the
	December 31, 20	017 or until a successor	is duly app	ointed.			
3.	Requesting Agency	: Mayor's Office					
4.	Name: AnthonPhone: 720-86.			l ordinand	ce/resolution.)		
5.	will be available forName: AnthonPhone: 720-86	<i>first and second reading</i> y Aragon	g, if necess		e/resolution <u>who</u>	o will present the item at Mayo	r-Council and who
6.	General description [Insert general d	of proposed ordinance	e includin	g contra	ct scope of worl	k if applicable:	
	Please complete the fo			may resui	lt in a delay in p	rocessing. If a field is not app	licable, please
		ontrol Number: Terms effective imme	diately and	l expiring	December 31, 2	2017	
		ouncil District:					
7.	Is there any controv explain.	versy surrounding this	ordinance	e? (Group	os or individuals	who may have concerns abou	t it?) Please
	[Start typing here	e.]					
		To be	completed	d by Mave	or's Legislative	Теат:	
SIR	F Tracking Number		•	- ,,		e Entered:	
J110	L Hucking Humbel.		_		Date	Differed.	



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: Buswess Wikeveneut PASTRICT BOAKE	
Last Name: BRUNO First Name: JOHN	
Occupation/Employer: REAL ESTATE / CIM GROW	
Work Address: 3033 E. FIXST NE. City: DENVEX Zip: 80206	
Work E-mail Address: JBRUNO@ CLMGROUP. COM	
Work Phone: 510.992.6164 Work/Home Fax:	
Home Address: 882 S. YORK ST City: DENNER Zip: # 80209	?
Home Phone: NA Cell Phone/ Pager: 773.220.7054	
Home E-mail Address: DRUNOSAU CHOTMAIL.COM	
Are you a registered voter? (Pe) No If so, what county? PEWEK	
Colorado ID or Driver's License Number: 12 223 @12	
Denver City Council District No.: 6 Ethnicity WITE	
Highest Level of Education or Degree Earned: MASTEKS Year Completed: 2008	
References (List three persons, not related to you, whom you have known at least one year): Name Address Phone Number	
EMILY HWGA 303.808.9442	
KYLE PUFFY 720.272.9460	
PAN WALKER 214.562.4942	
Special Information: Is there anything that would adversely affect public confidence in your appointment or service? Ye If yes, please explain on a separate sheet of paper.	es No
2.11.20	15
Signature Date	
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



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: 9th Avenue Business Improvement District

Last Name: Cannon First Name: Frank

Occupation/Employer: Continuum Partners, LLC

Work Address: 1400 Sixteenth Street, Suite 320 City: Denver Zip: 80202

Work E-mail Address: frank.cannon@continuumllc.com

Work Phone: 303-573-0050 Work/Home Fax: 303-573-0011

Home Address: 2560 Birch Street City: Denver Zip: 80207

Home Phone: 303-455-5053 Cell Phone/ Pager: 303-916-0852

Home E-mail Address:

Are you a registered voter? Yes If so, what county? City and County of Denver

Colorado ID or Driver's License Number: 94-171-1826

Denver City Council District No.: 8 Ethnicity Caucasian

Highest Level of Education or Degree Earned: B.ENVD

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

Downtown Denver Partnership Civic Ventures Board Denver Downtown Development Authority Board

Urban Land Institute

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

 Name
 Address
 Phone Number

 Diane Barrett
 Office of the Mayor, City and County of Denver
 (720) 865-8780

 Bruce James
 410 17th Street, Suite 2222, Denver, CO 80202
 (303) 223-1167

 Steve Kaplan
 1675 Broadway, Suite 2300, Denver, CO 80202
 (303) 825-7000

Special Information:

Is there anything that would adversely affect public confidence in your appointment or service? No

If yes, please explain on a separate sheet of paper.

Sighature

Date

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



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: 9th Avenue Business Improvement Distric	t
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Last Name: Falcone

First Name: Mark

Occupation/Employer: Continuum Partners, LLC

Work Address: 1400 Sixteenth Street, Suite 320

City: Denver Zip: 80202

Work E-mail Address: mark.falcone@continuumllc.com

Work Phone: 303-573-0050 Work/Home Fax: 303-573-0011

Home Address: 1465 Delgany St.

City: Denver Zip: 80202

Home Phone: n/a

Cell Phone/ Pager: 303-884-1473

Home E-mail Address: n/a

Are you a registered voter?

If so, what county? City and County of Denver

Colorado ID or Driver's License Number: 97-106-0690

Denver City Council District No.: 9

Ethnicity Caucasian

Highest Level of Education or Degree Earned: Bachelors

Year Completed: 1985

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

The Nature Conservancy

Museum of Contemporary Art | Denver

Bonfils Stanton Foundation

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

Name

Address

Phone Number

Daniel J. Murphy, 1400 Sixteenth Street, Suite 320, Denver, CO 80202 303-887-0023 Tom Gougeon, 632 Humboldt St., Denver, CO 80218 303-717-1956 Mark Smith, 1610 Little Raven St., Suite 115, Denver, CO 80202-303-324-2285

Special Information:

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

Signature

Date

Return Completed Form to:

Anthony R. Aragon, Director of Boards and Commissions



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: GTA AVE BUS IN 055	IN DODUCTION DICTRICT
	First Name: PATZIC	
	CONTINUUM PARZINGUES	
Work Address: 1900 107A	ST SUTE 3 ZO City: DENNE	z Zip: 80202
Work E-mail Address: patr	rck. hecke continuum llc. co	3 <i>\mathcal{n}</i>
Work Phone: (720) 944.	Work/Home Fax: (303	5) 573-WY
Home Address: 7662 E 8	TH PL City: DEPUER	Zip: 80 Z 3 O
Home Phone: (303) 341	-4145 Cell Phone/ Pager: _(2	503) 981-5257
Home E-mail Address:plu	echo quail xom	
Are you a registered voter?		EHUENE
Colorado ID or Driver's Licens	se Number: 92-048-2741	
Denver City Council District N	o.: 5 Ethnicity CA	JCASION
Highest Level of Education or	Degree Earned: MKTER'S Y	ear Completed: ZOOO
Memberships/ Organizations/ \	Volunteer Activities (include past or preser	nt):
ANTEPOTETS COUNCIL IN	TETENSTIONAL FINANCE COM	1177E; Lower
community MASTER	2 ASSOCIATION (BOARZO TIGIBU	r t-trunsveed!
MDGOC BONED OF D		
References (List three persons, Name	not related to you, whom you have known Address	n at least one year): Phone Number
JOHN ACKERSHAN	775ZE ATH NE, DENGT (700) 235-5511
ERIC HIRAGA	8500 PENX BLUD DEWER (303) 392 - 2206
GIZELL HELLINETY	8500 PENA BLUD, DENVOYE (30\$) 342-2182
Special Information: Is there anything that would ad If yes, please explain on a sep	versely affect public confidence in your ap	ppointment or service? Yes No
	Ponkadaum	7/11/12
	Portant CM Signature	Z/[1/]5 Date
Return Completed Form to: Anthony R. Aragon, Director o		

1437 Bannock Street, Room 350

Denver, CO 80202 Phone: (720) 865-9032 Fax: (720) 865-8787

anthony.aragon@denvergov.org



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.

Type of print in blue of blues his.
Board or Commission you are applying for: 9th Avenue Business Improvement Distri
Last Name: Robinson First Name: Jenny
Occupation/Employer: Development Manager/Continuum Partners
Work Address: 1400 16th St. #320 City: Denver Zip: 80202
Work E-mail Address: Jenny robinson @ continuum 11c. com
Work Phone: 720-946-4654 Work/Home Fax:
Home Address: 1265 S. Saint Paul St. City: Denver Zip: 80210
Home Phone: 720 837-6314 Cell Phone/ Pager:
Home E-mail Address:
Are you a registered voter? Yes No If so, what county? Denver
Colorado ID or Driver's License Number: 04-218-0267
Denver City Council District No.: 6 Ethnicity Caucasion
Highest Level of Education or Degree Earned: Graduak MBA Year Completed: 18
Memberships/ Organizations/ Volunteer Activities (include past or present):
University of Colorado Real Estate Center: Urban Land Institute;
Denver Eurban Scholars Mentor; Craig Hospital Volunteer;
Commercial Real Estate Women member; Downtown Denver Partnership Leadership
References (List three persons, not related to you, whom you have known at least one year): Name Address Program 2015 Program 2015
Frank Cannon 1400 16th St. Sure 320 303-573-6050
Allison Recker 2901 Wyandot St. 720-947-7668
Mark Falcone 1400 16th St. Juite 320 303-573-0050
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.
Genny Robinson 2-11-15 Signature Date
Return Completed Form to: Date
Anthony R. Aragon, Director of Boards and Commissions

1437 Bannock Street, Room 350

anthony.aragon@denvergov.org

Denver, CO 80202 Phone: (720) 865-9032 Fax: (720) 865-8787