

Boards and Commissions - Applicant Information

Printed Date: 12-06-2010

Prefix: MS. **Last Name:** MALONE **First Name:** JAMIE **Middle Name:**

Applicant/Appointee Record Id: 2880 **Date Last Modified:** June-28-2007 04:20:54 AM MDT **App Deleted Flag:**

Occupation: DPT HUMAN SVCS AGING & ADULT SERVICES

Employer: STATE OF COLORADO

Work Email: JAMIE.MALONE@STATE.CO.US

Work Address: 1575 SHERMAN STREET

Work City: DENVER **Work State:** CO **Work Zip:** 80203 **Work Zip Ext:**

Work Phone: 303-866-2663 **Work Phone Ext:** **Work Fax:** 303-866-2696 **Work Cell Phone:** 303-548-2360

Home Email:

Home Address: 2536 DOWNING STREET

Home City: DENVER **Home State:** CO **Home Zip:** 80205 **Home Zip Ext:**

Home Phone: 303-832-2345 **Home Cell Phone:**

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

City Council District: 8 **City Council Other:**

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

Education Level: TECH COLLEGE **Year Completed:** 1989

Experience: NEIGHBORHOOD SERVICES **Interest:** NEIGHBORHOOD SERVICES **Confidence:** NO

Confidence Extension:

City Employed: NO **Date Submitted:** June-28-2007 04:20:35 AM MDT

Boards Applying For:

DENVER COMMISSION ON AGING

References

Reference 1: First Name: MARK **Last Name:** SHELTON **Phone:** 303-463-4110

Reference 2: First Name: JEANETTE **Last Name:** HENSLEY **Phone:** 303-866-2636

Reference 3: First Name: SUE **Last Name:** BOZINOVSKI **Phone:** 303-455-1000

Skills, Activities, Memberships, Resume/Cover Letter:

ADMINISTRATION FOR COLORADO COMMISSION ON AGING, CURRENT STUDENT

Board Assignment Information:

Relation Id: 3609 **BoardName:** DENVER COMMISSION ON AGING **Delete Flag:** N

Status: MEMBER **Reason:** APPOINTED **Start Date:** 08-01-2007 **End Date:** NONE **Tech Date:** 08-31-2010

Resolution: 89 2007 **Addendum:** COUNCIL DISTRICT 8

Boards and Commissions - Applicant Information

Printed Date: 12-06-2010

Prefix: MR. **Last Name:** PRICE SR. **First Name:** MORRIS **Middle Name:**

Applicant/Appointee Record Id: 2871 **Date Last Modified:** June-13-2007 02:10:47 AM MDT **App Deleted Flag:**

Occupation:

Employer:

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: MWPRI39@AOL.COM

Home Address: 5065 WORCHESTER STREET

Home City: DENVER **Home State:** CO **Home Zip:** 80239 **Home Zip Ext:**

Home Phone: 303-373-0479 **Home Cell Phone:**

Birth Date: July-04-2776 12:00:0 **Gender:** MALE **Ethnicity:** AFRICAN AMERICAN **GLBT:** UNDECLARED

City Council District: 11 **City Council Other:**

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

Education Level: MASTER OR ARTS **Year Completed:** 1984

Experience: UNDECLARED **Interest:** NEIGHBORHOOD SERVICES **Confidence:** UNDECLARED

Confidence Extension:

City Employed: UNDECLARED **Date Submitted:** June-13-2007 02:10:47 AM MDT

Boards Applying For:

DENVER COMMISSION ON AGING

References

Reference 1: First Name: CHARLES **Last Name:** MOSS **Phone:** 303-399-2361

Reference 2: First Name: TIMOTHY **Last Name:** EMILY **Phone:** 303-324-6228

Reference 3: First Name: PERCY **Last Name:** RYAN **Phone:** 303-750-7583

Skills, Activities, Memberships, Resume/Cover Letter:

DANIELS FUND COLLEGE PREP PROGRAM, DISABLED AMERICAN VETERANS, AARP, NAACP

Board Assignment Information:

Relation Id: 3547 **BoardName:** DENVER COMMISSION ON AGING **Delete Flag:** N

Status: MEMBER **Reason:** APPOINTED **Start Date:** 06-04-2007 **End Date:** NONE **Tech Date:** 08-31-2010

Resolution: 64 2007 **Addendum:** REP. CITY COUNCIL DISTRICT 11

Boards and Commissions - Applicant Information

Printed Date: 12-06-2010

Prefix: UNDECLARED **Last Name:** ARMSTRONG **First Name:** SANDI **Middle Name:**
Applicant/Appointee Record Id: 2903 **Date Last Modified:** February-07-2008 12:40:59 PM MST **App Deleted Flag:**
Occupation: SELF-EMPLOYED
Employer:
Work Email: SJARMSTRONGLCSW@COMCAST.NET
Work Address: 900 LOGAN STREET
Work City: DENVER **Work State:** CO **Work Zip:** 80203 **Work Zip Ext:**
Work Phone: 303-831-1339 **Work Phone Ext:** 1 **Work Fax:** **Work Cell Phone:**
Home Email:
Home Address: 6790 W. 45TH PLACE
Home City: WHEATRIDGE **Home State:** CO **Home Zip:** 80033 **Home Zip Ext:**
Home Phone: 303-422-2985 **Home Cell Phone:**
Birth Date: July-04-2776 12:00:0 **Gender:** FEMALE **Ethnicity:** CAUCASIAN **GLBT:** YES
City Council District: UNDECLARED **City Council Other:**
Registered Voter: YES **Registered County:** JEFFERSON **Political Affiliation:** UNDECLARED
Education Level: MSW **Year Completed:** 1976
Experience: HUMAN SERVICES **Interest:** HUMAN SERVICES **Confidence:** NO
Confidence Extension:
City Employed: NO **Date Submitted:** October-23-2007 08:23:55 AM MDT

Boards Applying For:
DENVER COMMISSION ON AGING

References

Reference 1: **First Name:** JUDY **Last Name:** CALHOUN **Phone:** 303-733-7743
Reference 2: **First Name:** MORRIS **Last Name:** PRICE **Phone:** 303-292-4455
Reference 3: **First Name:** PAT **Last Name:** GOURLEY **Phone:** 303-436-3115

Skills, Activities, Memberships, Resume/Cover Letter:

GAY & GRAY IN THE WEST, MENTAL HEALTH ASSOCIATION OF COLORADO

Board Assignment Information:

Relation Id: 3703 **BoardName:** DENVER COMMISSION ON AGING **Delete Flag:** N
Status: MEMBER **Reason:** APPOINTED **Start Date:** 06-13-2007 **End Date:** NONE **Tech Date:** 08-31-2010
Resolution: 64/2007 **Addendum:** REP. PRIVATE AGENCY

BOARDS AND COMMISSIONS APPLICATION

Please complete the following information in full,
attach a cover letter, current resume or biography and return to the address below.

Type or print in blue or black ink.

Board or Commission you are applying for: Mayor's Commission on Ageing

Last Name Ragon First Name: Lee

Occupation/Employer: Retired Denver Public Schools 32 years
Denver Park's & Recreation/Aquatics 50 years this May 2009
Work Address: 4601 W. 46th Ave City: Denver Zip: 80212

Work E-mail Address: lee.ragon@ci.denver.co.us

Work Phone: (303) 780-8655 ⁷⁸⁰⁻⁸⁶⁵⁻⁰⁰⁶⁵ ~~458-4796~~ Work/Home Fax: (303) 964-1000 ²²⁹⁻⁷⁶⁸⁷

Home Address: 550 E. 12th Ave #1604 City: Denver Zip: 80203

Home Phone: (303) 863-8434 Cell Phone/ Pager: _____

Home E-mail Address: _____

Are you a registered voter? Yes No If so, what county? Denver

Denver City Council District No.: 10 D. Robb Ethnicity (Optional) _____

Highest Level of Education or Degree Earned: Masters +90 Year Completed: 1976

Memberships/ Organizations/ Volunteer Activities (include past or present): Committee on Health and Safety for Am. Red Cross. AARP. Nat'l Parks and Rec Colo. Parks and Rec.

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

Name	Address	Phone Number
<u>Lisa Perry</u>	<u>4601 W. 46th Ave Den 80212</u>	<u>(303) 964-1001</u>
<u>Mary Madrid</u>	<u>Highland Sr. Ctr. 2880 Osceola Den. 90212</u>	<u>(303) 458-4868</u>
<u>Kelly Kitts</u>	<u>Cook Rec. Ctr. 7100 Cherry Creek Dr. So. Den. 80224</u>	<u>(303) 692-5659</u>

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.

Lee Ragon Dec 17, 2008
Signature Date

Return Completed Form to:
Suzan Moore, Director of Boards and Commissions
City and County of Denver Building, Room 350
Denver, CO 80202 Phone: (720) 865-9034 Fax: (720) 865-8787
Suzan.moore@denvergov.org

