

**ORDINANCE/RESOLUTION REQUEST**

Please email requests to the Mayor’s Legislative Team  
at [MileHighOrdinance@DenverGov.org](mailto: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 11, 2015**

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 reappointments of Jim Chavez and Craig Archibald to the Denver Housing Authority Board for terms effective immediately and expiring July 20, 2020 and to approve the appointment of Marsha Brown for a term effective immediately and expiring July 20, 2019 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](mailto: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](mailto: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:**
- 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: 09-11-2015

**Prefix:** MR. **Last Name:** ARCHIBALD **First Name:** CRAIG **Middle Name:** E  
**Applicant/Appointee Record Id:** 987 **Date Last Modified:** March-29-2006 01:13:46 AM MST **App Deleted Flag:**  
**Occupation:** CEO  
**Employer:** URBAN PEAK  
**Work Email:** CRAIG.ARCHIBALD@URBANPEAK.ORG  
**Work Address:** 730 21ST ST.  
**Work City:** DENVER **Work State:** CO **Work Zip:** 80205 **Work Zip Ext:**  
**Work Phone:** (303)777-8082 **Work Phone Ext:** **Work Fax:** **Work Cell Phone:**  
**Home Email:** HUMBOLDT2@AOL.COM  
**Home Address:** 544 CIRCLE DRIVE  
**Home City:** DENVER **Home State:** CO **Home Zip:** 80206 **Home Zip Ext:**  
**Home Phone:** (303)394-3052 **Home Cell Phone:** (303)332-7371  
**Birth Date:** July-04-2776 12:00:0 **Gender:** MALE **Ethnicity:** CAUCASIAN **GLBT:** UNDECLARED  
**City Council District:** 10 **City Council Other:**  
**Registered Voter:** UNDECLARED **Registered County:** **Political Affiliation:** UNDECLARED  
**Education Level:** **Year Completed:**  
**Experience:** UNDECLARED **Interest:** UNDECLARED **Confidence:** UNDECLARED  
**Confidence Extension:**  
**City Employed:** UNDECLARED **Date Submitted:** May-06-2005 09:03:18 AM MDT

### Boards Applying For:

HOMELESS COMMISSION ON

### 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:** 2758 **BoardName:** HOMELESS COMMISSION ON **Delete Flag:** N

**Status:** MEMBER **Reason:** APPOINTED **Start Date:** 03-29-2006 **End Date:** 09-01-2008 **Tech Date:** 09-01-2008

**Resolution:** **Addendum:** REP. URBAN PEAK

**Relation Id:** 4387 **BoardName:** HOUSING AUTHORITY DENVER **Delete Flag:** N

**Status:** MEMBER **Reason:** APPOINTED **Start Date:** 07-21-2010 **End Date:** NONE **Tech Date:** 07-20-2015

**Resolution:** **Addendum:**

**Relation Id:** 2570 **BoardName:** WELFARE REFORM BOARD DENVER **Delete Flag:** N

**Status:** MEMBER **Reason:** REAPPOINTED **Start Date:** 01-01-2006 **End Date:** 01-01-2010 **Tech Date:** 01-01-2010

## Boards and Commissions - Applicant Information

Printed Date: 09-11-2015

**Prefix:** MR. **Last Name:** CHAVEZ **First Name:** JIM **Middle Name:**  
**Applicant/Appointee Record Id:** 2400 **Date Last Modified:** May-30-2006 02:34:17 AM MDT **App Deleted Flag:**  
**Occupation:** EXECUTIVE DIRECTOR  
**Employer:** LATIN AMERICAN EDUCATIONAL FOUNDATION AND REALTOR  
**Work Email:** JCHAVEZ@LAEF.ORG  
**Work Address:** 561 SANTA FE DRIVE  
**Work City:** DENVER **Work State:** CO **Work Zip:** 80204 **Work Zip Ext:**  
**Work Phone:** 303-446-0541 **Work Phone Ext:** 11 **Work Fax:** 303-446-0526 **Work Cell Phone:**  
**Home Email:** RICHARDJCHAVEZ@AOL.COM  
**Home Address:** 10143 AUTUMN BLAZE TR.  
**Home City:** HIGHLANDS RANCH **Home State:** CO **Home Zip:** 80129 **Home Zip Ext:**  
**Home Phone:** 303-683-3969 **Home Cell Phone:** 303-810-1088  
**Birth Date:** July-04-2776 12:00:0 **Gender:** MALE **Ethnicity:** HISPANIC **GLBT:** UNDECLARED  
**City Council District:** DOUGLAS COUNTY **City Council Other:**  
**Registered Voter:** YES **Registered County:** DOUGLAS **Political Affiliation:** UNDECLARED  
**Education Level:** BS **Year Completed:** 1987  
**Experience:** UNDECLARED **Interest:** UNDECLARED **Confidence:** NO  
**Confidence Extension:**  
**City Employed:** NO **Date Submitted:** May-30-2006 02:34:17 AM MDT

### Boards Applying For:

DENVER LATINO COMMISSION

### References

**Reference 1: First Name:** DON **Last Name:** MARES **Phone:** 303-861-1000

**Reference 2: First Name:** **Last Name:** **Phone:**

**Reference 3: First Name:** **Last Name:** **Phone:**

### Skills, Activities, Memberships, Resume/Cover Letter:

HIGHLANDS RANCH PARKS & RECREATION FOUNDATION BOARD MEMBER, CO STUDENT OBLIGATION BOND AUTHORITY BOARD MEMBER, CSU ALUMNI ASSOCIATION BOARD MEMBER.

### Board Assignment Information:

**Relation Id:** 3846 **BoardName:** DENVER LATINO COMMISSION **Delete Flag:** N

**Status:** MEMBER **Reason:** REAPPOINTED **Start Date:** 01-02-2008 **End Date:** 01-01-2010 **Tech Date:** 01-01-2010

**Resolution:** 1 2008 **Addendum:** REAPPT.

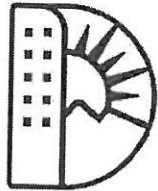
**Relation Id:** 2885 **BoardName:** DENVER LATINO COMMISSION **Delete Flag:** N

**Status:** MEMBER **Reason:** APPOINTED **Start Date:** 06-01-2006 **End Date:** 01-01-2008 **Tech Date:** 01-01-2008

**Resolution:** **Addendum:**

**Relation Id:** 4236 **BoardName:** HOUSING AUTHORITY DENVER **Delete Flag:** N

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: Denver Housing Authority
Last Name: BROWN First Name: MARSHA
Occupation/Employer: Denver Human Services - Child Welfare - Trauma Grant
Work Address: 1200 Federal Blvd City: Denver Zip: 80204
Work E-mail Address: MARSHA.BROWN@DenverGov.org
Work Phone: 720.944-6231 Work/Home Fax:
Home Address: 4238 Mariposa City: Denver Zip: 80211
Home Phone: 720.329-6094 Cell Phone/ Pager: 720.329.6094
Home E-mail Address: SMARTYBROWN26@GMAIL.COM
Are you a registered voter? Yes No If so, what county? Denver
Colorado ID or Driver's License Number: 92-120-4143
Denver City Council District No.: Ethnicity Black - African Amer.
Highest Level of Education or Degree Earned: BS/BA Year Completed: 2011
Memberships/ Organizations/ Volunteer Activities (include past or present):
Volunteer (Alumni) WARREN Village

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 Marc Agins, Monroe Trotman, and Michelle Davis.

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.

Signature Date 8.14.15

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