

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: October 3, 2016

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.)

The Department of Safety is requesting an ordinance approving and providing for the execution of a contract between the City and County of Denver and the State of Colorado for the funding of the Cognitive Behavioral Treatment Program in FY 2016-2017.

3. Requesting Agency:

Department of Safety

4. Contact Person: (With actual knowledge of proposed ordinance/resolution.)

- **Name:** Laura Wachter or Greg Mauro
- **Phone:** 720-913-6445/720-913-8252
- **Email:** Laura.Wachter@denvergov.org greg.mauro@denvergov.org
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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:** Greg Mauro
- **Phone:** 720-913-8252
- **Email:** greg.mauro@denvergov.org

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

The Division of Community Corrections is requesting an ordinance to approve a contract with the State of Colorado -Division of Criminal Justice in the amount of \$1,456,939.29 to fund the FY16-17 Cognitive Behavioral Treatment program.

<u>Revenue</u>	<u>Contract</u>	<u>Amount</u>
Colorado Division of Criminal Justice	2016-30623	\$ 1,456,939.29

****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.)

- a. **Contract Control Number:** 2016-30623
- b. **Duration:** 10/1/16 through 6/30/2017
- c. **Location:** n/a
- d. **Affected Council District:** All
- e. **Benefits:** To provide residential and non-residential community corrections services
- f. **Costs:** Funding is provided by the State of Colorado

To be completed by Mayor's Legislative Team:

SIRE Tracking Number: _____

Date Entered: _____

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

We do not believe there are any issues surrounding this agreement.

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