

**ORDINANCE/RESOLUTION REQUEST**

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**Date of Request: December 17, 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:**

Authorizes an amendment with The Salvation Army, through contract control number SOCSV-2013-13075-03, to add an additional \$130,000.00 for a total contract amount of \$515,000.00. Funds are paid through local mil levy funding to coordinate mentoring services and financial support necessary for homeless families and/or seniors to move to permanent housing.

The Salvation Army  
180 E. Ocean Blvd., 9th floor  
Long Beach, CA 90802

**3. Requesting Agency:** Denver Department of Human Services

**4. Contact Person:**

- **Name:** Ron Mitchell
- **Phone:** 720-944-2903
- **Email:** Ron.Mitchell@denvergov.org

**5. Contact Person:**

- **Name:** Ron Mitchell
- **Phone:** 720-944-2903
- **Email:** Ron.Mitchell@denvergov.org

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

This resolution request is to amend a contract with The Salvation Army through the Family and Senior Homeless Initiative (FSHI) program to assist with housing for homeless families and seniors. The Salvation Army will recruit new organizations to raise money to help pay the first month's rent for clients in the program, retain housing and match homeless families and seniors with mentors as the clients are placed in housing.

- a. Contract Control Number:** 2013-13075-03
- b. Duration:** 1/1/2016 – 12/31/2016
- c. Location:** Denver Department of Human Services
- d. Affected Council District:** All Districts
- e. Benefits:** Will help seniors and homeless families find and retain housing as well as provide mentors for clients.
- f. Costs:** Adding \$130,000.00 for a total contract amount of \$515,000.00.

**7. Is there any controversy surrounding this ordinance? Please explain.**

No

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*To be completed by Mayor's Legislative Team:*

SIRE Tracking Number: \_\_\_\_\_

Date Entered: \_\_\_\_\_