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.

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Di compale com	[T] non n		₩ ₩ ₽	,	ate of Request: Se	ptember 3, 2014
Please mark one:	☐ Bill Request	or	XX Resolutio	n Request		
1. Has your agency su	bmitted this request	in the last 12	2 months?			
☐ Yes	XX No				• .	•
If yes, please ex	xplain:					
	ncise, one sentence de es the type of request: t, etc.)					
	Mayoral appointments liately and expiring Jun					on for a term
3. Requesting Agency	: Mayor's Office		•			
■ Name: Anthon ■ Phone: 720-86	5-9032		ordinance/resoluti	on.)		
• Email: anthony	y.aragon@denvergov.i	org				
will be available for Name: Anthon Phone: 720-86 Email: anthon	5-9032 y.aragon@denvergov.o	ng, if necessa org	<u>iry.)</u>			ouncu una wno
6. General description	of proposed ordinar	ice including	contract scope of	f work if applicabl	e:	
[Insert general d	escription here.]		•			
**Please complete the fo enter N/A for that field—			nay result in a dela	ny in processing. If	a field is not applice	able, please
a. Contract C	ontrol Number:					
	Terms effective imm	ediately and	expires June 30, 2	016		
c. Location:		• .				
i .	ouncil District:		•			
e. Benefits:			·			
f. Costs:	•	•				
7. Is there any controv explain.	versy surrounding thi	is ordinance'	? (Groups or indiv	iduals who may hav	ve concerns about it	?) Please
[Start typing her	e.]				•	
•				·		
•		. ·				
	То	be completed	by Mayor's Legisl	lative Team:		· · · · · · · · · · · · · · · · · · ·
SIRE Tracking Number:		•		Date Entered:		

BOARDS AND COMMISSIONS APPLICATION



Please complete the following information in full, 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:	Women's Commission	
Last Name: Ricketson	First Name: Mary	
Occupation/Employer: Denver Metro Ch		-
Work Address: 1445 Market Street	City: Denver Zip: 80202	
Work E-mail Address: mary.rioketson@der	nverleadership.org mericketson eg	mal com
Work Phone: 303-316-0298	Work/Home Fax:	
Home Address: 353 Clermont	_{City:} Denver _{Zip:} 80220	-
Home Phone: 303-316-0298	Cell Phone/ Pager: 303-916-1916	
Home E-mail Address: mericketson@gn	nail.com	
Are you a registered voter? (Yes) No		t
Colorado ID or Driver's License Number: 9		
Denver City Council District No.: 7		
	ed: JD Year Completed: 19	
Memberships/ Organizations/ Volunteer Act Colorado, Denver, Women's Bar Ass	tivities (include past or present):	
MiCasa Resource Center		-
Women's Chamber Leadership Four	ndation	<u>-</u>
	o you, whom you have known at least one year): dress Phone Number	
Donna Evans 1350 17th Street,	, Denver, CO 80202 303-458-0220	
Dolores Atencio	and the state of t	
Christine Marquez Hudson	303-539-5604	
If yes, please explain on a separate sheet of	public confidence in your appointment or service? f paper. Signature Date	Yes No 5/16/14
Return Completed Form to: Anthony R. Aragon, Director of Boards and		

1437 Bannock Street, Room 350

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

Fax: (720) 865-8787

anthony.aragon@denvergov.org

BOARDS AND COMMISSIONS APPLICATION



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

Type or print in blue or black ink.

그리는 이번 얼마를 보았다. 그렇지만 되었다면 되었다면 얼마나 되었다는데 그 모든
Board or Commission you are applying for: <u>DEMVER WOMENS COMMISSION</u>
Last Name: WRIGHT First Name: JILL
Occupation/Employer: OWNER / EXECUTIVESHINE AT DENVER INTERNATIONAL AIRPOR
Work Address: 8900 PENA BOULEVARD City: DENVER Zip: 80249
Work E-mail Address: <u>EXECUTIVESHINEGYAHOO.COM</u>
Work Phone: 303-435-6973 Work/Home Fax: N/A
Home Address: 2548 SAVAGE ROAD City: ELIZABETH Zip: 80107
Home Phone: 303-435-6973 Cell Phone/ Pager: 303-435-6973
Home E-mail Address: <u>EXECUTIVESHINE@YAHOO.COM</u>
Are you a registered voter? Yes X No If so, what county? <u>ELBERT</u>
Colorado ID or Driver's License Number: 922566404 CO
Denver City Council District No.: 9 Ethnicity CAUCASIAN
Highest Level of Education or Degree Earned: <u>UNIVERSITY OF DENMERS</u> Completed: <u>1985</u>
Memberships/ Organizations/ Volunteer Activities (include past or present):
CERTIFIED DBE / WBE / ACDBE
ELIZABETH CHAMBER OF COMMERCE ELBERT COUNTY MENTOR PROGRAM
APRPORT MINORITY ADVISIORY COUNCIL
References (List three persons, not related to you, whom you have known at least one year): Name Address Phone Number
TOM RADIGAN P.O. BOX 894, WHEATRIDGE CO 80034 303-881-1996
YUME TRAN 19751 E. MAINSTREET, PARKER CO 80138 303-601-5992
RON CONTRERAS 8500 PENA BOULEVARD, DENVER CO 80249 303-342-2141
Special Information: Is there anything that would adversely affect public confidence in your appointment or service? Y If yes, please explain on a separate sheet of paper.
JILL WRIGHT JUNE 3, 2014
Signature Date Return Completed Form to: Anthony R. Aragon, Director of Boards and Commissions 1437 Bannock Street, Room 350 Degree CO. 80202 Phone (720) 865-9032 Fax: (720) 865-8787

anthony.aragon@denvergov.org