ORDINANCE/RESOLUTION REQUEST

Please email requests to the Mayor's Legislative Team

at MileHighOrdinance@DenverGov.org by 3:00pm on Monday. Contact the Mayor's Legislative team with questions

Please mark one: Bill Request	Date of Request: <u>3/31/2023</u> or ☐ Resolution Request			
1. Type of Request:	-			
Contract/Grant Agreement Intergovern	rnmental Agreement (IGA) Rezoning/Text Amendment			
☐ Dedication/Vacation ☐ Appropriation	tion/Supplemental DRMC Change			
Other:				
acceptance, contract execution, contract amenda	etc., include <u>name of company or contractor</u> and indicate the type of request: grant lment, municipal code change, supplemental request, etc.) c d/b/a Servicios de la Raza, Inc. To provide mental health supports to youth			
3. Requesting Agency: Children's Affairs				
4. Contact Person:				
Contact person with knowledge of proposed ordinance/resolution	Contact person to present item at Mayor-Council and Council			
Name: Dr. Susan Gallo	Name: Terra Swazer			
Email: susan.gallo@denvergov.org	Email: terra.swazer@denvergov.org			
La Raza Services, Inc. Has a solid reputation for pro-	osed request. Attach executive summary if more space needed: oviding quality mental and behavioral health services to youth in Denver. This critically needed in Denver neighborhoods and communities that are experiencing			
6. City Attorney assigned to this request (if appl	plicable): Raana Haidari			
7. City Council District: citywide				
8. **For all contracts, fill out and submit accompanying Key Contract Terms worksheet**				
To be co	ompleted by Mayor's Legislative Team:			
Resolution/Bill Number:				
TOUR DITTIMITOR.				

Key Contract Terms

	tract: Professional Services onal Services > \$500K; IGA/Grant A	Agreement, Sale or Lease of Rea	l Property):	
Vendor/Cont	tractor Name: La Raza Services, Inc			
Contract con	ntrol number: MOEAI-202367315			
Location: Citywide				
	contract? Yes No Is this rm/Duration (for amended contracts.		No If yes, how many? I <u>amended</u> dates): 01/01/2023 - 12/31/2024	
		<u></u>	<u> </u>	
Contract Am	nount (indicate existing amount, ame	nded amount and new contract	total):	
	Current Contract Amount (A)	Additional Funds (B)	Total Contract Amount (A+B)	
	\$1,000,000		\$1,000,000	
	Current Contract Term	Added Time	New Ending Date	
	1/1/2023 - 12/31/2024			
contract in high rates		critically needed in Denver neighb	oral health services to youth in Denver. This orthoods and communities that are experiencing t, why not? Ability to meet an urgent need	
Has this contractor provided these services to the City before? ⊠ Yes ☐ No				
Source of funds: ARPA Is this contract subject to: W/MBE DBE SBE XO101 ACDBE N/A				
Who are the	subcontractors to this contract? N/A	A		
	To be co	mpleted by Mayor's Legislative T	Peam:	
Resolution/Bill Number:		Date Entered:		