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.

XX Resolution Request

Date of Request: September 21, 2015

Incomplete request forms will be returned to sender which may cause a delay in processing.

or

☐ Bill Request

1. Has your agency submitted this request in the last 12 months?

XX No

Please mark one:

Yes Yes

	If yes, please explain:	
2.	Title: (Include a concise, one sentence description – please include <u>name of company or contractor</u> and <u>contract control number</u> - that clearly indicates the type of request: grant acceptance, contract execution, amendment, municipal code change, supplemental request, etc.)	
	To approve the Mayoral reappointments of Benzel Jimmerson and Sudan Muhammad and the appointments of Nicole Frazier, Valmay Hartzog Howard, Molly Moats and Dwayne Pride to the Denver African American Commission for a terms effective immediately and expiring on September 26, 2017 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	
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	
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 er N/A for that field – please do not leave blank.) a. Contract Control Number: b. Duration: Terms effective immediately and expire on September 26, 2017 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 Teams	
~	To be completed by Mayor's Legislative Team.	
SIR	E Tracking Number: Date Entered:	
	Revised 08/16/10	

Boards and Commissions - Applicant Information

Printed Date: 09-21-2015

Prefix: UNDECLARED Last Name: JIMMERSON First Name: BENZEL Middle Name:

Applicant\Appointee Record Id: 3980 Date Last Modified: August-19-2014 10:53:18 AM MDT App Deleted Flag:

Occupation: CSU EXTENSION

Employer: Work Email:

Work Address: 888 E. ILIFF AVENUE

Work City: DENVER Work State: CO Work Zip: 80210 Work Zip Ext:

Work Phone: 720-913-5274 Work Phone Ext: Work Fax: Work Cell Phone:

Home Email: DIVERSITYDYNAMICSDENVER@GMAIL.COM

Home Address: 1560 NOME STREET 311

Home City: AURORA Home State: CO Home Zip: 80010 Home Zip Ext:

Home Phone: Home Cell Phone: 720-277-4168

Birth Date: July-04-2776 12:00:0 Gender: MALE Ethnicity: AFRICAN AMERICAN GLBT: UNDECLARED

City Council District: UNDECLARED City Council Other:

Registered Voter: YES Registered County: ARAPAHOE Political Affiliation: UNDECLARED

Education Level: Year Completed:

Experience: UNDECLARED Interest: UNDECLARED Confidence: UNDECLARED

Confidence Extension:

City Employed: YES Date Submitted: August-19-2014 10:53:18 AM MDT

Boards Applying For:

DENVER AFRICAN AMERICAN COMMISSION

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: 5285 BoardName: DENVER AFRICAN AMERICAN COMMISSION Delete Flag: N

Status: MEMBER Reason: APPOINTED Start Date: 08-18-2014 End Date: NONE Tech Date: 09-26-2015

Resolution: 0632 2014 Addendum:

Date Printed: 09-21-2015 Page 1 of 1

Boards and Commissions - Applicant Information

Printed Date: 09-21-2015

Prefix: UNDECLARED Last Name: MUHAMMAD First Name: SUDAN Middle Name:

Applicant\Appointee Record Id: 4019 Date Last Modified: October-01-2014 07:37:29 AM MDT App Deleted Flag:

Occupation:

Employer: SIMRAE SOLUTIONS, LLC

Work Email: Work Address:

Work City: Work State: CO Work Zip: Work Zip Ext:

Work Phone: Work Phone Ext: Work Fax: Work Cell Phone:

Home Email: SUDAN.IBN@GMAIL.COM

Home Address: 1160 COLORADO BOULEVARD 22

Home City: DENVER Home State: CO Home Zip: 80203 Home Zip Ext:

Home Phone: Home Cell Phone: 720-288-8970

Birth Date: July-04-2776 12:00:0 Gender: MALE Ethnicity: AFRICAN AMERICAN GLBT: UNDECLARED

City Council District: UNDECLARED City Council Other:

Registered Voter: YES Registered County: DENVER Political Affiliation: UNDECLARED

Education Level: Year Completed:

Experience: UNDECLARED Interest: UNDECLARED Confidence: UNDECLARED

Confidence Extension:

City Employed: UNDECLARED Date Submitted: October-01-2014 07:37:29 AM MDT

Boards Applying For:

DENVER AFRICAN AMERICAN COMMISSION

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: 5325 BoardName: DENVER AFRICAN AMERICAN COMMISSION Delete Flag: N

Status: MEMBER Reason: APPOINTED Start Date: 09-29-2014 End Date: NONE Tech Date: 09-26-2015

Resolution: 0748 2014 Addendum:

Date Printed: 09-21-2015 Page 1 of 1

Please complete the following information in full, attach a cover letter, 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:

Last name: trazier First name: Nicole

Occupation: Required Director (State Operations)
Employer: U.S. Senator Corny Gardner
Work address: God 18th Street, Swite 1825, North Tower
riv. Therein City: Denver

ZIP code: Sustan

Work phone: 720-413-0486

Work/Home fax: 303-391-5780

Home address: 26140 E Davies

d

City: Amrura

ZIP code: 800016

Home phone: NA

Home email address: rucolle. a. frazile agracile corn
Mobile phone: 66-260-6047

Are you a registered voter? ¿cs / no

If so, what county are you registered in? Arapahoe

Colorado driver's license No : 11 - 019 - 07 24

Highest level of education or, degree earned: Bachelor of Hits Ethnicity: Particion Forcerican Year completed: 2001

Please list any memberships, organizations and/or volunteer activities you are a part of (past or present): Black Forest Fire, (Letiet, Emerging, Leaders Inchitate (Asigm)) (where Secretary Starte Holdingson), Charles Jack Western Holdingson), Lactines (Letires with Adultance Charles Charles)

Ed Wingfeild Maya unaster Chuck Poplatein References (Please list three persons, not related to you, whom you have known at least one year): 730-297-1910 303-974-8077 34-8-7-4364 Phone number ed. wingfield aulfabluach.org mowawharter42@gmail cpoplistein @gnail.com

Please complete the following information in full, attach a cover letter, 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: DENVER AFRICAN AMERICAN COMMISSIO
First name: Valmy Last name: Hartzog Howard
Occupation: Police Office Employer: City + Country Of Denver Work address:) 1331 Cherokee ST. City: Denver ZIP code: 80204 Work email address: Valmy, howard a denver gov, org Work phone: 720. 913 6638 Work/Home fax: 720 913 7019
Home address: 5063 Scranton ST. City: Denver ZIP code: 80239 Home phone: 303-307-4417 Home email address: arms no 15 Koo Kao Kao Msn. com Mobile phone: 303 842 9994
Are you a registered voter (yes) no If so, what county are you registered in? Colorado driver's license No.: 92-00Z-4781 Ethnicity: Asex Amsers 60
Highest level of education or, degree earned: I have obtained my Education With THE DPD Year completed: 25+ years of College Courses through City + County Throughout Colorado + Several OTHER STATES SEVERAL COLLEGE Please list any memberships, organizations and/or volunteer activities you are a part of Accredited Come
Please list any memberships, organizations and/or volunteer activities you are a part of Accredited Jones (past or present): NATIONAL BLACK POLICE OFFICERS, Black Police OFFICERS
Black Sheriff's Association, Colorado Association of Blacks LAW ENFORCEMENT, NATIONAL LATING Police Office Association, Jules Ensemble Member Restoration Christian Fellowship, Instructor Cordio Kine Dance, Reasing For Children After School References (Please list three persons, not related to you, whom you have known at least one year): Library Name Phone number Address SGT. Jim Periodul 720-641-1052 1331 Chrokee St. Denver
PASTUR FELIX GILBERT 303 867-7700 15640 E 6th AVE ANDRE 8001 Partene Nicholas 303-371-1763 5083 Scrutton ST Denver 8023



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.

Type or pr	THE ILL DIGE OF DIACK MIK.
Board or Commission you are applying for:	DAKC
Last Name: Moats	
Occupation/Employer: <u>Assistant Attorney</u> Work Address: <u>1300 Broadway</u> , 10 th Floor	General City: Denver Zip: 80210
Work E-mail Address:molly.moats@state	e.co.us
Work Phone: _(720)508-6570	Work/Home Fax: <u>(720) 508-6032</u>
Home Address: 1621 S. Josephine St.	City: Denver Zip: 80210
Home Phone: (303) 910-7095	Cell Phone/ Pager: (303) 910-7095
Home E-mail Address: molly allen@hotma	nil.com
Are you a registered voter? (Yes) No	If so, what county? Denver
Colorado ID or Driver's License Number: _	92-004-3300
Denver City Council District No.: 7	Ethnicity <u>Caucasian</u>
Highest Level of Education or Degree Earne	d: <u>Juris Doctor</u> Year Completed: 2003
Memberships/ Organizations/ Volunteer Act	tivities (include past or present):
Caucus, Schlessman YMCA Board of Direct	ndo Defense Lawyer's Association, Colorado Women's Law ctor, Denver Public School Mentor Reading Program, Vice intion, Phi Beta Kappa, Schlessman YMCA Strong Kids
	o you, whom you have known at least one year): ldress Phone Number
Vincent Morscher 1300 Broadw	vay, Denver, CO 80203 (720) 508-6588
	Greenwood Village, CO 80111 (303) 22-4661 d., Highlands Ranch, CO 80123 (720) 730-3900
Special Information: Is there anything that would adversely affect If yes, please explain on a separate sheet	ct public confidence in your appointment or service? Yes No of paper. Signature Date
Return Completed Form to: Anthony R. Aragon, Director of Boards an 1437 Bannock Street, Room 350	
Denver, CO 80202 Phone: (720) 865-90	32 Fax: (720) 865-8787

anthony.aragon@denvergov.org

Please complete the following information in full, attach a cover letter, 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: AA Commission
Last Name: Pride First Name: Dwayne
Occupation/Employer: Vendor - Writer (Denver Voice
Work Address: 1600 Downing St. City: Denter Zip: 80218
Work E-mail Address: MManial Camai (.com
Work Phone: 303 539 - 7226 Work/Home Fax: Same
Home Address: P.o. Box 40423 City: Dewler Zip: 80204
Home Phone: Cell Phone/ Pager:
Home E-mail Address: Sawe
Are you a registered voter? Yes No If so, what county?
Denver City Council District No.:
Ethnicity/Tribal Affiliation(s) (Optional)
Highest Level of Education or Degree Earned: BS, MKt. Year Completed: 1990
Memberships/ Organizations/ Volunteer Activities (include past or present):
, and a second s
References (List three persons, not related to you, whom you have known at least one year):
Name Address Phone Number
Davius Smith 201 W. Colfax 71903-8459
Sarah Harvey 1600 Downing St. 3/539-7229
Derikon Steele 7/775-1915
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.
7 (28/15
Signature Date
Return Completed Form to: Anthony Aragon, Director of Boards and Commissions
City and County of Denver Building, Room 350
Denver, CO 80202 Phone: (720) 865-9032 Fax: (720) 865-8787
anthony.aragon@denyergoy.org