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 Re	quest	: Dece	mber 1	15, 201
Ple	ase mark (ne:	☐ Bill Request		or	Χ] F	Resolut	tion F	Reque	est						
1.	Has your	agency s	ubmitted this reque	st in th	ne last 1	2 mont	ths?	?									
	□ Y	'es	X No														
	If yes	s, please e	xplain:														
2.		rly indica	oncise, one sentence of tes the type of requests, etc.)														<u>number</u>
			Mayoral appointmenting December 31, 20								ental He	alth fo	r a teri	m eff	ective J	anuary	1,
3.	Requestin	ng Agenc	y: Mayor's Office														
4.	NamePhon	e: Antho e: 720-8	With actual knowled ny Aragon 65-9032 ny.aragon@denvergo		roposed	' ordina	ince	e/resolı	ıtion.,	.)							
5.	will be averaged Name ■ Phone	ailable for e: Antho e: 720-8	Nith actual knowledg r first and second rea ny Aragon 65-9032 ny.aragon@denvergo	iding, i			nce/	e/resolu	tion <u>v</u>	who w	ill press	ent the	item a	<u>ıt Ma</u> y	yor-Coi	uncil a	nd who
6.	General o	lescriptio	n of proposed ordin	nance i	ncludin	g contr	ract	t scope	of w	vork if	f applic	able:					
	[Inser	rt general	description here.]														
			f ollowing fields: (Inc - please do not leave			may res	sult	t in a de	elay ir	in proc	cessing.	If a fi	eld is i	not ap	pplicab	le, pled	ase
	a. (Contract (Control Number:														
	b. I	Ouration:															
		Location:															
			Council District:														
		Benefits:															
	f. (Costs:															
7.	Is there a explain.	ny contro	oversy surrounding	this or	dinance	e? (Gro	oups	s or ind	lividu	uals wh	ho may	have c	oncerr	ns abo	out it?)	Pleas	e
	[Start	typing he	ere.]														
			7	To be co	ompleted	d by Ma	ayor	r's Leg	islati	ive Tea	am:						
SIF	RE Tracking	g Number:			-	-	-				intered:						