ORDINANCE/RESOLUTION REQUEST

Please email requests to the Mayor's Legislative Team

at MileHighOrdinance@DenverGov.org by 9 a.m. Friday. Contact the Mayor's Legislative team with questions

Please mark one: Bill Request or	Date of Request: 7/8/202
1. Type of Request:	
	eement (IGA) Rezoning/Text Amendment
☐ Dedication/Vacation ☐ Appropriation/Supplem	
	ental DRMC Change
◯ Other: Board & Commissions Appointments	
2. Title: (Start with <i>approves, amends, dedicates</i> , etc., include <u>na</u> acceptance, contract execution, contract amendment, municipal description.	name of company or contractor and indicate the type of request: grant code change, supplemental request, etc.)
Appointment to the Denver Commission on Aging	
Term: 08/01/2024 - 07/31/2027 or until a successor is duly a	ppointed
Biswanath Das Virginia Ortiz Bibian Reyes Kaipeng Wang 3. Requesting Agency: Mayor's Office of Boards and Commiss	ions
4. Contact Person: Contact person with knowledge of proposed ordinance/resolution (e.g., subject matter expert)	Contact person for council members or mayor-council
Name: Esther Lee Leach	Name: Esther Lee Leach
Email: esther.leeleach@denvergov.org	Email: esther.leeleach@denvergov.org
 5. General description or background of proposed request. (who, what, why) Appointment to the Denver Commission on Aging 6. City Attorney assigned to this request (if applicable): 	Attach executive summary if more space needed:
7. City Council District:	
8. **For all contracts, fill out and submit accompanying Ke	y Contract Terms worksheet**
To be completed by M	Mayor's Legislative Team:
Resolution/Bill Number:	Date Entered:

Key Contract Terms

Type of Cont	ract: (e.g. Professional Services >	\$500K; IGA/Grant Agreement, Sale	or Lease of Real Property):
Vendor/Cont	ractor Name (including any dba	's):	
Contract con	trol number (legacy and new):		
Location:			
Is this a new	contract? Yes No Is t	his an Amendment? Yes No	If yes, how many?
Contract Ter	m/Duration (for amended contra	acts, include <u>existing</u> term dates and <u>ar</u>	mended dates):
Contract Am	ount (indicate existing amount, a	mended amount and new contract tot	al):
	Current Contract Amount (A)	Additional Funds (B)	Total Contract Amount (A+B)
	Current Contract Term	Added Time	New Ending Date
Scope of work	k:		
Was this contractor selected by competitive process? If not, why not?			
Has this cont	ractor provided these services to	the City before?	
Source of fun	ıds:		
Is this contra	ct subject to: W/MBE	DBE SBE XO101 ACD	BE N/A
WBE/MBE/I	OBE commitments (construction,	design, Airport concession contracts)	:
Who are the	subcontractors to this contract?		
	To be	e completed by Mayor's Legislative Tea	n:
Resolution/Bi	ll Number:	Date Er	tered: