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.

or

X Resolution Request

☐ Bill Request

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

Please mark one:

☐ Yes

If yes, please explain:

Date of Request: February 6, 2015

2.	2. Title: (Include a concise, one sentence description – please include <u>name of company or contractor</u> and <u>contract control num</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 Paul Burleson and Nita Gonzales and the appointment of Roger Citizen Oversight Board for terms effectively immediately and expiring January 1, 2019 OR until a successor appointed.						
3.	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 www.will be available for first and second reading, if necessary.) Name: Anthony Aragon Phone: 720-865-9032 Email: anthony.aragon@denvergov.org 					
6.	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 expiring January 1, 2019					
	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.]					
	F 4101					
	To be completed by Mayor's Legislative Team:					
STR	E Tracking Number: Date Entered:					
	Revised 08/16/10					

Boards and Commissions - Applicant Information

Printed Date: 02-06-2015

Prefix: REVERAND Last Name: BURLESON First Name: PAUL Middle Name:

Applicant\Appointee Record Id: 178 Date Last Modified: October-25-2006 01:59:07 AM MDT App Deleted Flag:

Occupation:

Work City:

Employer: PASTOR FRIENDSHIP BAPTIST CHURCH

Nork Email: Nork Address:

Work State: CO Work Zip: Work Zip Ext:

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

Home Email: PASTORPAULB@AOL.COM Home Address: 5039 WHEELING WAY

Home City: DENVER Home State: CO Home Zip: 80239 Home Zip Ext:

Home Phone: (303)371-0149 Home Cell Phone:

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

City Council District: 11 City Council Other:

Registered Voter: UNDECLARED Registered County: Political Affiliation: UNDECLARED

Education Level: Year Completed:

Experience: UNDECLARED Interest: UNDECLARED Confidence: UNDECLARED

Confidence Extension:

City Employed: UNDECLARED Date Submitted: May-06-2005 09:00:17 AM MDT

Boards Applying For:

No boards listed.

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: 3483 BoardName: CITIZEN OVERSIGHT BOARD Delete Flag: N

Status: MEMBER Reason: REAPPOINTED Start Date: 01-02-2007 End Date: NONE Tech Date: 01-01-2015

Resolution: 4 2007 Addendum: REAPPT.

Relation Id: 178 BoardName: CITIZEN OVERSIGHT BOARD Delete Flag: N

Status: MEMBER Reason: APPOINTED Start Date: 01-01-2005 End Date: 01-01-2007 Tech Date: 01-01-2007

Resolution: 16 2005 Addendum:

Date Printed: 02-06-2015 Page 1 of 1

Boards and Commissions - Applicant Information

Printed Date: 02-06-2015

Prefix: UNDECLARED Last Name: GONZALES First Name: NITA Middle Name: J

Applicant\Appointee Record Id: 341 Date Last Modified: December-16-2014 10:34:43 AM MST App Deleted Flag:

Occupation:

Employer: ESCUELA TLATELOLCO CENTRO DE ESTUDIOS

Nork Email:

Work Address: 2949 N. FEDERAL BLVD.

Work City: DENVER Work State: CO Work Zip: 80211 Work Zip Ext:

Work Phone: (303)964-8993 Work Phone Ext: Work Fax: (303)964-9795 Work Cell Phone:

Home Email: NJGONZAL@AOL.COM

Home Address: 4882 ELM CT.

Home City: DENVER Home State: CO Home Zip: 80221 Home Zip Ext:

Home Phone: Home Cell Phone:

Birth Date: July-04-2776 12:00:0 Gender: FEMALE Ethnicity: HISPANIC GLBT: UNDECLARED

City Council District: 1 City Council Other:

Registered Voter: UNDECLARED Registered County: Political Affiliation: UNDECLARED

Education Level: Year Completed:

Experience: UNDECLARED Interest: UNDECLARED Confidence: UNDECLARED

Confidence Extension:

City Employed: UNDECLARED Date Submitted: May-06-2005 09:00:25 AM MDT

Boards Applying For:

No boards listed.

References

Reference 1: First Name: Last Name: Phone: Reference 2: First Name: Last Name: Phone:

Reference 3: First Name: La

Last Name: Phone:

Skills, Activities, Memberships, Resume/Cover Letter:

Board Assignment Information:

Relation Id: 4574 BoardName: CITIZEN OVERSIGHT BOARD Delete Flag: N

Status: MEMBER Reason: APPOINTED Start Date: 06-28-2011 End Date: NONE Tech Date: 01-01-2015

Resolution: Addendum: REPLACING ANTHONY NAVARRO

Relation Id: 3565 BoardName: EARLY CHILDHOOD EDUCATION COMMISSION MAYORS Delete Flag: N

Status: FORMER Reason: END OF TERM Start Date: 05-01-2007 End Date: NONE Tech Date: NONE

Resolution: Addendum:

Relation Id: 341 BoardName: EARLY CHILDHOOD EDUCATION COMMISSION MAYORS Delete Flag: N

Status: MEMBER Reason: APPOINTED Start Date: 04-23-2004 End Date: 04-30-2007 Tech Date: 04-30-2007

Date Printed: 02-06-2015 Page 1 of 2

BOARDS AND COMMISSIONS APPLICATION



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.

*3 bear hour						
Board or Commission you are applying for:	FIZEN	00E12516	HT BOAR	トク		
Last Name: SHERMAN F	irst Name:	ROGER				
Occupation/Employer: CONSULTAP						
Work Address: 1625 BROADWAY 4700 City: DENVER Zip: 80202						
Work E-mail Address: RSHERMAN O CRLASSOCIATES, COM						
Work Phone: 363-592-5465 Work/Home Fax: 303-592-5460						
Home Address: 3536 E. 8TH AVE City: DENVER Zip: 80206						
Home Phone:	Cell Phone/ P	ager: <u>303-</u>	506-989	S		
Home E-mail Address: N/A		<u></u>	·			
Are you a registered voter? (es) No If so, what county? DENVER						
Colorado ID or Driver's License Number: 95-020-2738						
Denver City Council District No.: 10 Ethnicity WHITE						
Highest Level of Education or Degree Earned: <u>BACHELORS</u> FYear Completed: <u>1987</u>						
Memberships/ Organizations/ Volunteer Activities (include past or present):						
SAFEHOUSE DENVER-BOARD MEMBER (PRESENT)						
ONE COLORADO - WOLLINTEET (PRESENT)						
CHERRY CREEK ARTS FEST	IVAL-B	OARD ME	MBER CE	2A ST)		
References (List three persons, not related to you. Name Address			ist one year): e Number			
CATUIE GREIG 1330 GAY	fuoro s	т. 36	3-584-7	583		
DANA CRANFIED 2600 LI	TTLE PA	VEN 30	3-892-	1888		
MARIA GARCIA NERDY 1855	. ELM 5	r. 3	03-888-48			
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.						
- Marian Control of the Control of t		MYM		20 15		
Return Completed Form to:	ature		Date			
Anthony R. Aragon, Director of Boards and Com 1437 Bannock Street, Room 350	missions					

Fax: (720) 865-8787

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

anthony.aragon@denvergov.org