

**ORDINANCE/RESOLUTION REQUEST**

Please email requests to the Mayor’s Legislative Team  
at [MileHighOrdinance@DenverGov.org](mailto: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 Request: April 20, 2015**

Please mark one:  Bill Request or  Resolution Request

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

Yes  No

If yes, please explain:

2. **Title:** *(Include a concise, one sentence description – please include name of company or contractor and contract control number - that clearly indicates the type of request: grant acceptance, contract execution, amendment, municipal code change, supplemental request, etc.)*

To approve the Mayoral reappointments of Voradel Carey, Angelle Fother and Corey Johnson and the appointment of Alexis Crews to the Denver African American Commission for a terms effective immediately and expiring on May 1, 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](mailto: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](mailto: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 enter N/A for that field – please do not leave blank.)*

- a. **Contract Control Number:**
- b. **Duration:** Terms effective immediately and expire on May 1, 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 Team:*

SIRE Tracking Number: \_\_\_\_\_

Date Entered: \_\_\_\_\_

## Boards and Commissions - Applicant Information

Printed Date: 04-20-2015

**Prefix:** UNDECLARED **Last Name:** CAREY **First Name:** VORADEL **Middle Name:**

**Applicant/Appointee Record Id:** 3806 **Date Last Modified:** September-16-2013 10:26:26 AM MDT **App Deleted Flag:**

**Occupation:**

**Employer:** DISH NETWORK

**Work Email:**

**Work Address:** 5300 DISH BOULEVARD

**Work City:** LITTLETON **Work State:** CO **Work Zip:** 80220 **Work Zip Ext:**

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

**Home Email:** VORADEL@COMCAST.NET

**Home Address:** 460 S. MARION PARKWAY 1102C

**Home City:** DENVER **Home State:** CO **Home Zip:** 80209 **Home Zip Ext:**

**Home Phone:** 303-722-7398 **Home Cell Phone:** 720-581-4705

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

**City Council District:** 6 **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:** September-16-2013 10:26:26 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:** 5075 **BoardName:** DENVER AFRICAN AMERICAN COMMISSION **Delete Flag:** N

**Status:** MEMBER **Reason:** APPOINTED **Start Date:** 09-09-2013 **End Date:** NONE **Tech Date:** 05-01-2015

**Resolution:** 0554 2013 **Addendum:**

## Boards and Commissions - Applicant Information

Printed Date: 04-20-2015

**Prefix:** UNDECLARED **Last Name:** FOUTHER **First Name:** ANGELLE **Middle Name:**  
**Applicant/Appointee Record Id:** 3588 **Date Last Modified:** February-16-2012 07:20:30 AM MST **App Deleted Flag:**  
**Occupation:** SENIOR COMMUNICATIONS OFFICER  
**Employer:** THE DENVER FOUNDATION  
**Work Email:** ACFOUTHER@DENVERFOUNDATION.ORG  
**Work Address:** 55 MADISON STREET, 8TH FLOOR  
**Work City:** DENVER **Work State:** CO **Work Zip:** 80239 **Work Zip Ext:**  
**Work Phone:** 303-996-6490 **Work Phone Ext:** **Work Fax:** **Work Cell Phone:**  
**Home Email:** ACFOUTHER@AOL.COM  
**Home Address:** 4900 TROY STREET  
**Home City:** DENVER **Home State:** CO **Home Zip:** 80239 **Home Zip Ext:**  
**Home Phone:** 303-371-1605 **Home Cell Phone:** 303-868-1796  
**Birth Date:** July-04-2776 12:00:0 **Gender:** FEMALE **Ethnicity:** AFRICAN AMERICAN **GLBT:** UNDECLARED  
**City Council District:** 11 **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:** February-16-2012 07:20:30 AM MST

### 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:** 4790 **BoardName:** DENVER AFRICAN AMERICAN COMMISSION **Delete Flag:** N

**Status:** MEMBER **Reason:** REAPPOINTED **Start Date:** 06-24-2013 **End Date:** NONE **Tech Date:** 05-01-2015

**Resolution:** 0382 2013 **Addendum:** REAPPT

## Boards and Commissions - Applicant Information

Printed Date: 04-20-2015

**Prefix:** UNDECLARED **Last Name:** JOHNSON **First Name:** COREY **Middle Name:**  
**Applicant\Appointee Record Id:** 3589 **Date Last Modified:** February-16-2012 07:28:08 AM MST **App Deleted Flag:**  
**Occupation:** SOCIAL CASE WORKER  
**Employer:** DENVER HUMAN SERVICES  
**Work Email:** COREY.JOHNSON@DENVERGOV.ORG  
**Work Address:** 1200 FEDERAL BOULEVARD  
**Work City:** DENVER **Work State:** CO **Work Zip:** 80204 **Work Zip Ext:**  
**Work Phone:** 720-944-2687 **Work Phone Ext:** **Work Fax:** **Work Cell Phone:**  
**Home Email:** CDJSPAM@MSN.COM  
**Home Address:** 6169 S. CARR STREET  
**Home City:** LITTLETON **Home State:** CO **Home Zip:** 80123 **Home Zip Ext:**  
**Home Phone:** 303-972-6616 **Home Cell Phone:** 303-918-6785  
**Birth Date:** July-04-2776 12:00:0 **Gender:** MALE **Ethnicity:** CAUCASIAN **GLBT:** UNDECLARED  
**City Council District:** UNDECLARED **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:** YES **Date Submitted:** February-16-2012 07:28:08 AM MST

### 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:** 4793 **BoardName:** DENVER AFRICAN AMERICAN COMMISSION **Delete Flag:** N  
**Status:** MEMBER **Reason:** REAPPOINTED **Start Date:** 06-24-2013 **End Date:** NONE **Tech Date:** 05-01-2015  
**Resolution:** 0382 2013 **Addendum:** REAPPT

# BOARDS AND COMMISSIONS APPLICATION



Please complete the following information in full,  
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 Commission

Last Name: Crews First Name: Alexis

Occupation/Employer: U.S. Senator Michael Bennet

Work Address: 1127 Sherman Street City: Denver Zip: 80203

Work E-mail Address: alexis\_crews@bennet.senate.gov

Work Phone: 303-837-3809 Work/Home Fax: \_\_\_\_\_

Home Address: 1415 E. 9th Ave, Apt 3 City: Denver Zip: 80218

Home Phone: N/A Cell Phone/ Pager: 646-872-4277

Home E-mail Address: alexis.camille.crews@gmail.com

Are you a registered voter?  Yes  No If so, what county? Denver

Colorado ID or Driver's License Number: B-203-0279

Denver City Council District No.: 10 Ethnicity African American (Black.)

Highest Level of Education or Degree Earned: Bachelors Year Completed: 2012

Memberships/ Organizations/ Volunteer Activities (include past or present):

Denver NAACP Political Chair

DIARRO Energy Taskforce (focused on minorities in Energy jobs)

\*I was previously working on campaigns and didn't have much time to vote/ be as

References (List three persons, not related to you, whom you have known at least one year): involved as wanted

Name	Address	Phone Number
<u>Rosemary Rodriguez</u>	<u>1127 Sherman Street</u>	<u>303-653-7572</u>
<u>Adrian Kueber</u>	<u>1140 W. 5th Ave</u>	<u>303-917-3864</u>
<u>Pastor Eugene Downing</u>	<u>3701 Colorado Blvd</u>	<u>720-432-0329</u>

### 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.

Alexis Crews 3/4/2015  
Signature Date

Return Completed Form to:  
Anthony R. Aragon, Director of Boards and Commissions  
1437 Bannock Street, Room 350  
Denver, CO 80202 Phone: (720) 865-9032 Fax: (720) 865-8787  
[anthony.aragon@denvergov.org](mailto:anthony.aragon@denvergov.org)