## ORDINANCE/RESOLUTION REQUEST

				Date of Request: 01/22/2016
Please mark one: Bill Request		or	□ Resolution Request	
1.	Has your ag	ency submitted this request in	the last 1	12 months?
	☐ Yes	⊠ No		
	If yes, p	lease explain:		
2.	14438-03 to a	add an additional \$830,000.00, ing and treatment services for 7	with a tota	alth Center of Denver, through contract control number SOCSV-2013-al amount of \$2,490,000.00. Funds are paid through mill levy funding, to ally homeless individuals with co – occurring serious mental illness and
	Mental Healt 4141 E. Dick Denver, CO 8			
3.	3. Requesting Agency: Denver Department of Human Services			
4.	4. Contact Person:  Name: Ron Mitchell Phone: 720-944-2903 Email: Ron.Mitchell@denvergov.org			
5.	<ul><li>Phone:</li><li>Email:</li></ul>	Ron Mitchell 720-944-29032 Ron. Mitchell		
	the contract v		enver to pr	<b>luding contract scope of work if applicable:</b> Requests an amendment to rovide services for 75 chronically homeless individuals with co-occurring
	a. Con	ntract Control Number: SOC	CSV-2013-	-14438-03
		,		2/31/2016), Contract duration (1/1/2014 – 12/31/2016)
		ation: Denver Human Servicected Council District: All	es	
	e. Ben f. Cos	<b>refits:</b> Provides integrated su <b>ts:</b> \$2,490,000.00 with \$830,0	000 being a	_
7.	Is there any	controversy surrounding this	ordinance	ee? Please explain. No
		To be	complete	ed by Mayor's Legislative Team:
SIRE Tracking Number: Date Enter				Date Entered: