

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 Request: April 30, 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:** Supplemental Budget Appropriation Request for the Denver Sheriff Department

3. **Requesting Agency:** Budget and Management Office

4. **Contact Person:** (With actual knowledge of proposed ordinance/resolution.)

- **Name:** Rory Regan
- **Phone:** 720-913-5544
- **Email:** rory.regan@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:** Laura Wachter
- **Phone:** 720-913-6445
- **Email:** laura.wachter@denvergov.org

6. **General description of proposed ordinance including contract scope of work if applicable:**

The 2015 collective bargaining agreement between the City and County of Denver and the Fraternal Order of Police, Denver Sheriff Lodge 27 raises the salaries of members of the Sheriff Department's bargaining unit by 2.7%, which equates to an increase of \$1,802,271. This supplemental appropriation request will increase the Sheriff Department's total budget appropriation for 2015 to \$118,376,991.

*****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.)

- a. **Contract Control Number:** N/A
- b. **Duration:** 1/1/2015-12/31/2015
- c. **Location:** Multiple
- d. **Affected Council District:** All
- e. **Benefits:** Fulfillment of collective bargaining negotiations
- f. **Costs:** Increased personnel cost

7. **Is there any controversy surrounding this ordinance?** (Groups or individuals who may have concerns about it?) **Please explain.**

No.

To be completed by Mayor's Legislative Team:

SIRE Tracking Number: _____

Date Entered: _____