

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: May 16, 2018

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 appointment of Amanda Therrien to the Denver Commission for People with Disabilities for a term effective immediately and expiring on September 30, 2020, or until a successor is duly appointed.

3. Requesting Agency: Mayor's Office

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

- **Name:** Barry Burch Jr.
- **Phone:** 720-865-9128
- **Email:** barry.burch@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:** Barry Burch Jr.
- **Phone:** 720-865-9128
- **Email:** barry.burch@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:** Term effective immediately and expiring September 30, 2020.
- 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: _____