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.

														Γ	ate o	of Re	quest	: Oct	ober	20, 201
Ple	ease mark	cone	:	□ B	ill Requ	est	or	XX	Re	solut	tion R	Requ	est							
1.	Has you	ır aş	ency sı	ıbmitte	d this red	quest in t	he last 1	2 mont	hs?											
		Yes		$X \boxtimes$	No															
	If y	es, p	lease e	xplain:																
2.	Title: (Include a concise, one sentence description – please include <u>name of company or contractor</u> and <u>contract control number</u> - that clearly indicates the type of request: grant acceptance, contract execution, amendment, municipal code change, supplemental request, etc.)																			
	Wils	son,	Sandra	Mann a	nd the ap	nents of E pointmen nber 26, 2	t of Tary	n Lewi	s to t	he De	enver	Afri	can-Ar	nerica	larjor in Co	rie Le mmis	wis, I ssion	Leslii I for a t	Lewis erm e	s, Sid ffective
3.	Request	ing	Agency	: Mayo	r's Offic	e														
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 who will be available for first and second reading, if necessary.) Name: Anthony Aragon Phone: 720-865-9032 Email: Anthony.aragon@denvergov.org																			
6.	General				posed or on here.]	dinance i	ncluding	g contra	act so	cope	of wo	ork il	f appli	cable	•					
	llease con er N/A for							may resi	ult in	a de	lay in	n prod	cessing	. If a	field	is no	t app	licable	e, plec	ase
	b.	Dur	ation:	Control 1	Number:															
			ation: cted C	ouncil I	istrict:															
		Ben Cos	efits: :s:																	
7.	Is there a	any	contro	versy su	rroundii	ng this or	dinance	? (Grou	ıps o	r indi	ividua	als wi	ho may	have	conc	erns	about	t it?)]	Please	е
	[Star	rt typ	ing her	e.]																
				100 - 100 au		To be co	ompleted	l by Mar	vor's	Legi	slativ	e Tea	am:							
SIR	E Trackin	g Ni	ımber:			18413ANTE 75 97 (D.C.)	A section (1)		SS 75	0.			intered:							

Printed Date: 10-20-2011

Prefix: UNDECLARED Last Name: BROWN First Name: ERIN Middle Name:

Applicant\Appointee Record Id: 2998 Date Last Modified: June-04-2008 10:43:14 AM MDT App Deleted Flag:

Occupation: SERVICE COORDINATOR Employer: KAPPA MANAGEMENT INC. Work Email: ERIN101@QWEST.NET Work Address: 2160 DOWNING STREET

Work City: DENVER Work State: CO Work Zip: 80205 Work Zip Ext:

Work Phone: 303-837-9923 Work Phone Ext: Work Fax: Work Cell Phone

Home Email: ERINBROWN20@MSN.COM

Home Address: 4762 IRAN STREET

Home City: DENVER Home State: CO Home Zip: 80249 Home Zip Ext:

Home Phone: 303-371-4369 Home Cell Phone: 303-263-2360

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: BS Year Completed: 1992

Experience: OTHER Interest: OTHER Confidence: NO

Confidence Extension:

City Employed: NO Date Submitted: June-04-2008 10:43:14 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: 4042 BoardName: DENVER AFRICAN AMERICAN COMMISSION Delete Flag: N

Status: MEMBER Reason: APPOINTED Start Date: 06-04-2008 End Date: NONE Tech Date: 09-26-2011

Resolution: 80 2008 Addendum: REPL. DRINKS

Printed Date: 10-20-2011

Prefix: MS. Last Name: GRIMES First Name: KENNETH Middle Name: D.R.

Applicant\Appointee Record Id: 2004 Date Last Modified: March-30-2007 02:29:33 AM MDT App Deleted Flag:

Occupation:

Employer: COLORADO STATAT UNIVERSITY EXTENSION **Work Email:** KENNETH.GRIMES@CI.DENVER.CO.US

Work Address: 888 E. ILIFF AVENUE

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

Work Phone: 720-913-5267 Work Phone Ext: Work Fax: 720-913-5289 Work Cell Phone:

Home Email:

Home Address: 2620 POPLAR STREET

Home City: DENVER Home State: CO Home Zip: 80207 Home Zip Ext:

Home Phone: 303-321-7436 Home Cell Phone: 303-946-4817

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

City Council District: 11 City Council Other:

Registered Voter: YES Registered County: DENVER Political Affiliation: UNDECLARED

Education Level: MASTERS Year Completed:

Experience: NEIGHBORHOOD SERVICES Interest: EDUCATION/YOUTH Confidence: NO

Confidence Extension:

City Employed: YES Date Submitted: October-18-2005 11:14:50 AM MDT

Boards Applying For:

DENVER AFRICAN AMERICAN COMMISSION
EARLY CHILDHOOD EDUCATION COMMISSION MAYORS
YOUTH COMMISSION

References

Reference 1: First Name: DAVID Last Name: WASHINGTON Phone: 303-355-3423

Reference 2: First Name: BARBARA Last Name: MARTIN-WORLEY Phone: 720-913-5266

Reference 3: First Name: ANITA Last Name: WEST-WARE Phone: 303-333-7595

Skills, Activities, Memberships, Resume/Cover Letter:

Board Assignment Information:

Relation Id: 4044 BoardName: DENVER AFRICAN AMERICAN COMMISSION Delete Flag: N

Status: MEMBER Reason: REAPPOINTED Start Date: 06-04-2008 End Date: NONE Tech Date: 09-26-2011

Resolution: 80 2008 Addendum: REPL. HOUSTON P.

Printed Date: 10-20-2011

Prefix: HONORABLE Last Name: JONES First Name: RAYMOND Middle Name:

Applicant\Appointee Record Id: 1360 Date Last Modified: January-25-2007 01:28:10 AM MST App Deleted Flag:

Occupation: ASSSITANT PROFESSOR

Employer: METROPOLITAN STATE, SCHOOL OF BUSINESS

Work Email: RJONE113@MSCD.EDU

Work Address: CAMPUS BOX 78 P.O. BOX 173362

Work City: DENVER Work State: CO Work Zip: 80217 Work Zip Ext:

Work Phone: 303-556-3064 Work Phone Ext: Work Fax: Work Cell Phone

Home Email:

Home Address: 780 STEELE STREET

Home City: DENVER Home State: CO Home Zip: 80206 Home Zip Ext:

Home Phone: 303-321-3878 Home Cell Phone: 303-618-5047

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

City Council District: UNDECLARED City Council Other:

Registered Voter: YES Registered County: DENVER Political Affiliation: UNDECLARED

Education Level: DOCTORATE Year Completed: 1971

Experience: NEIGHBORHOOD SERVICES Interest: NEIGHBORHOOD SERVICES Confidence: NO

Confidence Extension:

City Employed: NO Date Submitted: July-13-2005 12:00:00 AM MDT

Boards Applying For:

DENVER AFRICAN AMERICAN COMMISSION

References

Reference 1: First Name: LARRY Last Name: LOPEZ Phone: 303-556-3061

Reference 2: First Name: SHARON Last Name: COCHRAN Phone: 303-344-8919

Reference 3: First Name: TYRONE Last Name: HOLT Phone: 303-225-8500

Skills, Activities, Memberships, Resume/Cover Letter:

Board Assignment Information:

Relation Id: 1278 BoardName: ART CULTURE AND FILM COMMISSION Delete Flag: N

Status: FORMER Reason: END OF TERM Start Date: 09-01-2004 End Date: NONE Tech Date: NONE

Resolution: Addendum:

Relation Id: 1277 BoardName: ART CULTURE AND FILM COMMISSION Delete Flag: N

Status: MEMBER Reason: APPOINTED Start Date: 08-24-2001 End Date: 08-31-2004 Tech Date: NONE

Resolution: 665 2001 Addendum: REP. COMMUNITY, REAPPT.

Relation Id: 3759 BoardName: DENVER AFRICAN AMERICAN COMMISSION Delete Flag: N

Status: MEMBER Reason: REAPPOINTED Start Date: 12-06-2007 End Date: NONE Tech Date: 09-26-2011

Printed Date: 10-20-2011

Prefix: UNDECLARED Last Name: LEWIS First Name: MARJORIE Middle Name: B

Applicant\Appointee Record Id: 540 Date Last Modified: January-22-2007 10:12:17 AM MST App Deleted Flag:

Occupation: EXECUTIVE DIRECTOR

Employer: CENTER FOR COMMUNITY EXCELLENCE & SOCIAL JUSTICE

Work Email: MARJORIELEWIS@CCESJ.ORG Work Address: 1600 DOWNING STREET, #220

Work City: DENVER Work State: CO Work Zip: 80218 Work Zip Ext:

Work Phone: (303)831-4500 Work Phone Ext: Work Fax: (303)831-4499 Work Cell Phone:

Home Email: MARJORIELEWIS@CCESJ.ORG

Home Address: 1573 OGDEN STREET

Home City: DENVER Home State: CO Home Zip: 80218 Home Zip Ext:

Home Phone: (303)861-7009 Home Cell Phone: 303-265-1513

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

City Council District: 1 City Council Other:

Registered Voter: YES Registered County: DENVER Political Affiliation: UNDECLARED

Education Level: PH.D. Year Completed: 1983

Experience: HUMAN SERVICES Interest: HUMAN SERVICES Confidence: NO

Confidence Extension:

City Employed: NO Date Submitted: May-06-2005 09:01:02 AM MDT

Boards Applying For:

DENVER AFRICAN AMERICAN COMMISSION

References

Reference 1: First Name: LINDA Last Name: WILLIAMS Phone: 303-200-9055
Reference 2: First Name: SANDRA Last Name: SEALE Phone: 720-886-0329
Reference 3: First Name: JAMES Last Name: PETERS Phone: 303-322-5200

Skills, Activities, Memberships, Resume/Cover Letter:

Board Assignment Information:

Relation Id: 3513 BoardName: DENVER AFRICAN AMERICAN COMMISSION Delete Flag: N

Status: MEMBER Reason: REAPPOINTED Start Date: 05-14-2007 End Date: NONE Tech Date: 09-26-2011

Resolution: Addendum:

Relation Id: 3463 BoardName: HUMAN SERVICES BOARD OF Delete Flag: N

Status: MEMBER Reason: REAPPOINTED Start Date: 04-01-2007 End Date: NONE Tech Date: 03-31-2012

Resolution: Addendum: REAPPT.

Relation Id: 540 BoardName: HUMAN SERVICES BOARD OF Delete Flag: N

Status: MEMBER Reason: APPOINTED Start Date: 11-01-2003 End Date: 03-31-2007 Tech Date: 03-31-2007

Printed Date: 10-20-2011

Prefix: UNDECLARED Last Name: LEWIS First Name: LESLII Middle Name:

Applicant\Appointee Record Id: 2811 Date Last Modified: October-03-2008 10:15:01 AM MDT App Deleted Flag:

Occupation: INTAKE SUPERVISOR
Employer: DIVISION OF CIVIL RIGHTS

Work Email: LESLII.LEWIS@DORA.STATE.CO.US Work Address: 1560 BROADWAY, SUITE 1050

Work City: DENVER Work State: CO Work Zip: 80203 Work Zip Ext:

Work Phone: 303-894-7819 Work Phone Ext: Work Fax: 303-894-7830 Work Cell Phone:

Home Email: LESLII.LEWIS@HOTMAIL.COM Home Address: 2970 KRAMERIA STREET

Home City: DENVER Home State: CO Home Zip: 80207 Home Zip Ext:

Home Phone: 303-465-4223 Home Cell Phone: 303-842-6703

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: MASTERS Year Completed:

Experience: NEIGHBORHOOD SERVICES Interest: NEIGHBORHOOD SERVICES Confidence: NO

Confidence Extension:

City Employed: NO Date Submitted: March-30-2007 02:06:34 AM MDT

Boards Applying For:

DENVER AFRICAN AMERICAN COMMISSION

References

Reference 1: First Name: GLORIA Last Name: TANNER Phone: 303-355-7288
Reference 2: First Name: MARY Last Name: DAVIS Phone: 303-331-4424
Reference 3: First Name: DEIDRE Last Name: MAGEE Phone: 303-556-4378

Skills, Activities, Memberships, Resume/Cover Letter:

SHORTER AFRICAN AMERICAN METHODIST EPISCOPAL CHURCH CHILDREN S FACILITATOR, CO-FOUNDER WITSEND

BOOK CLUB, SUSAN B. KOMEN RACE FOR THE CURE

Board Assignment Information:

Relation Id: 3521 BoardName: DENVER AFRICAN AMERICAN COMMISSION Delete Flag: N

Status: MEMBER Reason: APPOINTED Start Date: 05-14-2007 End Date: NONE Tech Date: 09-26-2011

Resolution: Addendum:

Printed Date: 10-20-2011

Prefix: MR. Last Name: WILSON First Name: SID Middle Name:

Applicant\Appointee Record Id: 643 Date Last Modified: March-30-2007 02:25:48 AM MDT App Deleted Flag:

Occupation:

Employer: RECEPTIVE TOUR OPERATOR

Work Email:

Work Address: 2940 E. COLFAX VE. #401

Work City: DENVER Work State: CO Work Zip: 80206 Work Zip Ext:

Work Phone: (303)758-8149 Work Phone Ext: Work Fax: Work Cell Phone:

Home Email: APGSID@AOL.COM

Home Address: 1513 LOCUST STREET

Home City: DENVER Home State: CO Home Zip: 80224 Home Zip Ext:

Home Phone: (303)956-1162 Home Cell Phone: (303)956-1162

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

City Council District: 6 City Council Other:

Registered Voter: UNDECLARED Registered County: Political Affiliation: UNDECLARED

Education Level: Year Completed:

Experience: NEIGHBORHOOD SERVICES Interest: NEIGHBORHOOD SERVICES Confidence: NO

Confidence Extension:

City Employed: NO Date Submitted: May-06-2005 09:01:29 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: 3522 BoardName: DENVER AFRICAN AMERICAN COMMISSION Delete Flag: N

Status: MEMBER Reason: APPOINTED Start Date: 05-14-2007 End Date: NONE Tech Date: 09-26-2011

Resolution: Addendum:

Relation Id: 3621 BoardName: LIBRARY COMMISSION Delete Flag: N

Status: MEMBER Reason: REAPPOINTED Start Date: 08-02-2007 End Date: 08-01-2011 Tech Date: 08-01-2011

Resolution: Addendum: REAPPT.

Relation Id: 643 BoardName: LIBRARY COMMISSION Delete Flag: N

Status: MEMBER Reason: APPOINTED Start Date: 01-01-2004 End Date: 08-01-2007 Tech Date: 08-01-2007

Printed Date: 10-20-2011

Prefix: MS. Last Name: MANN First Name: SANDRA Middle Name:

Applicant\Appointee Record Id: 2607 Date Last Modified: January-25-2007 01:54:09 AM MST App Deleted Flag:

Occupation: COMMUNITY INVESTMENT MANAGER

Employer: MILE HIGH UNITED WAY

Work Email: SANDRA.MANN@UNITEDWAYDENVER.ORG

Work Address: 2505 18TH STREET

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

Work Phone: 303-561-2343 Work Phone Ext: Work Fax: Work Cell Phone:

Home Email:

Home Address: 3368 S. ARGONNE CT.

Home City: AURORA Home State: CO Home Zip: 80013 Home Zip Ext:

Home Phone: 303-400-1712 Home Cell Phone: 720-270-2793

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

City Council District: UNDECLARED City Council Other:

Registered Voter: YES Registered County: ARAPAHOE Political Affiliation: UNDECLARED

Education Level: Year Completed:

Experience: HUMAN SERVICES Interest: HUMAN SERVICES Confidence: NO

Confidence Extension:

City Employed: NO Date Submitted: September-26-2006 02:26:09 AM MDT

Boards Applying For:

DENVER AFRICAN AMERICAN COMMISSION

References

Reference 1: First Name: ROBERT Last Name: WOOLFOLK Phone: 303-295-6180
Reference 2: First Name: CHARLOTTE Last Name: MCKINNEY Phone: 303-861-7433

Reference 3: First Name: GLORIA Last Name: TANNER Phone: 303-355-7288

Skills, Activities, Memberships, Resume/Cover Letter:

Board Assignment Information:

Relation Id: 3169 BoardName: DENVER AFRICAN AMERICAN COMMISSION Delete Flag: N

Status: MEMBER Reason: APPOINTED Start Date: 09-26-2006 End Date: NONE Tech Date: 09-26-2011

Resolution: Addendum:

BOARDS AND COMMISSIONS APPLICATION

Please complete the following information in full, attach a cover letter, 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: Lewis

First Name: Taryn

Occupation/Employer: Administrative Services Director/ Denver Urban Renewal Authority

Work Address: 1555 California Street #200

City: Denver

Zip: 80202

Work E-mail Address: tlewis@renewdenver.org

Work Phone: 303-606-4824

Work/Home Fax: 303-534-7303

Home Address: 13322 E Wyoming Pl

City: Aurora

Zip: 80012

Home Phone: 303-695-3028

Cell Phone/ Pager: 303-918-2285

Home E-mail Address: tlewis04@law.du.edu

Are you a registered voter?

Yes No

If so, what county? Arapahoe

Denver City Council District No.: N/A

Ethnicity (Optional) African American

Highest Level of Education or Degree Earned: Juris Doctorate

Year Completed: 2004

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

- 2009 Alumni of the Colorado Black Chamber of Commerce Chamber Connect Program,
- Black Law Students Association, University of Denver College of Law
- Aurora Lions Youth Football Organization

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

Name

Address

Phone Number

Tracy Huggins

1555 California St, #200, Denver, 80202

303-534-3872

Berina Ibrisagic, Esq.

1525 Sherman Street, 5th Fl, Denver, 80202 303-931-3925

Toya Nelson

2990 East 17th Street #2104

303-552-4261

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.

Return Completed Form to:

Suzan Moore, Director of Boards and Commissions

City and County of Denver Building, Room 350

Denver, CO 80202 Phone: (720) 865-9034

Fax: (720) 865-8787