

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: July 17, 2012

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 Jane-Frances Echeozo, Marcia Helfant, Caitlin Quander and the appointments of Christina Sigala, Maria Irvarren, Terrie Martinez, Amber Tafoya, Perla Gheiler and Robyn Vie-Carpenter to the Denver Women's Commission for terms effective immediately and expiring June 30, 2014 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

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 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 expires June 30, 2014
- 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: 07-17-2012

Prefix: UNDECLARED **Last Name:** ECHEOZO **First Name:** JANE-FRANCES **Middle Name:**
Applicant\Appointee Record Id: 3302 **Date Last Modified:** September-30-2010 10:19:04 AM MDT **App Deleted Flag:**
Occupation: NURSE
Employer: HEALTH SUCCESS INC.
Work Email: HSI@GOHEALTHSUCCESS.COM
Work Address: 1562 S. PARKER ROAD, SUITE 108
Work City: DENVER **Work State:** CO **Work Zip:** 80231 **Work Zip Ext:**
Work Phone: 303-755-5244 **Work Phone Ext:** **Work Fax:** **Work Cell Phone:**
Home Email: FRANYN@JUNO.COM
Home Address: 1470 S. LIMA STREET
Home City: AURORA **Home State:** CO **Home Zip:** 80012 **Home Zip Ext:**
Home Phone: 303-743-8625 **Home Cell Phone:**
Birth Date: July-04-2776 12:00:0 **Gender:** FEMALE **Ethnicity:** AFRICAN AMERICAN **GLBT:** UNDECLARED
City Council District: 5 **City Council Other:**
Registered Voter: YES **Registered County:** **Political Affiliation:** UNDECLARED
Education Level: **Year Completed:**
Experience: UNDECLARED **Interest:** UNDECLARED **Confidence:** UNDECLARED
Confidence Extension:
City Employed: UNDECLARED **Date Submitted:** September-30-2010 10:19:04 AM MDT

Boards Applying For:

No boards listed.

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: 4406 **BoardName:** WOMENS COMMISSION DENVER **Delete Flag:** N

Status: MEMBER **Reason:** APPOINTED **Start Date:** 08-16-2010 **End Date:** NONE **Tech Date:** 06-30-2012

Resolution: 10-0624 2010 **Addendum:**

Boards and Commissions - Applicant Information

Printed Date: 07-17-2012

Prefix: UNDECLARED **Last Name:** HELFANT **First Name:** MARCIA **Middle Name:**

Applicant/Appointee Record Id: 3303 **Date Last Modified:** September-30-2010 10:38:18 AM MDT **App Deleted Flag:**

Occupation: DIRECTOR

Employer: ALLIED JEWISH APARTMENTS

Work Email:

Work Address:

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

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

Home Email: MHELFANT@COMCAST.NET

Home Address: 8300 FAIRMOUNT DRIVE, UNIT N-104

Home City: DENVER **Home State:** CO **Home Zip:** 80247 **Home Zip Ext:**

Home Phone: 303-722-0053 **Home Cell Phone:** 303-931-4366

Birth Date: July-04-2776 12:00:0 **Gender:** FEMALE **Ethnicity:** UNDECLARED **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: UNDECLARED **Date Submitted:** September-30-2010 10:38:18 AM MDT

Boards Applying For:

No boards listed.

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: 4408 **BoardName:** WOMENS COMMISSION DENVER **Delete Flag:** N

Status: MEMBER **Reason:** APPOINTED **Start Date:** 08-16-2010 **End Date:** NONE **Tech Date:** 06-30-2012

Resolution: 10-0624 2010 **Addendum:**

Boards and Commissions - Applicant Information

Printed Date: 07-17-2012

Prefix: UNDECLARED **Last Name:** QUANDER **First Name:** CAITLIN **Middle Name:**

Applicant/Appointee Record Id: 3305 **Date Last Modified:** September-30-2010 10:41:49 AM MDT **App Deleted Flag:**

Occupation: ATTORNEY

Employer: HARRIS, KARSTAEDT, JAMISON & POWERS, P.C.

Work Email:

Work Address: 188 INVERNESS DRIVE WEST, SUITE 300

Work City: ENGLEWOOD **Work State:** CO **Work Zip:** 80112 **Work Zip Ext:**

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

Home Email: CAITLIN.QUANDER@GMAIL.COM

Home Address: 1967 S. LOCUST STREET

Home City: DENVER **Home State:** CO **Home Zip:** 80246 **Home Zip Ext:**

Home Phone: **Home Cell Phone:** 253-380-5311

Birth Date: July-04-2776 12:00:0 **Gender:** FEMALE **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: UNDECLARED **Date Submitted:** September-30-2010 10:41:49 AM MDT

Boards Applying For:

No boards listed.

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: 4411 **BoardName:** WOMENS COMMISSION DENVER **Delete Flag:** N

Status: MEMBER **Reason:** APPOINTED **Start Date:** 08-16-2010 **End Date:** NONE **Tech Date:** 06-30-2012

Resolution: 10-0624 2010 **Addendum:**

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 Women's Commission

Last Name: Sigala First Name: Maxine Christina

Occupation/Employer: Professor Chicana/o Studies Metropolitan State College of Denver

Work Address: Campus Box 41, P.O. Box 173362 City: Denver Zip: 80217

Work E-mail Address: selim@mscd.edu

Work Phone: 303 556-34124 Work/Home Fax: 303556-3178

Home Address: 4377 Yates St. City: Denver Zip: 80212

Home Phone: 720 309-4227 Cell Phone/ Pager: 720 309-4227

Home E-mail Address: positivelife13@gmail.com

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

Denver City Council District No.: _____ Ethnicity Chicana/Native American

Highest Level of Education or Degree Earned: 2 Masters Year Completed: 2002

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

1. American GI Forum., 2009- present, MSCD Alumni., La Raza Youth Conference, Denver, CO, Volunteer, 4/2012 - 9 News Health Fair: Volunteer - Denver Indian Center - 04/2012
2. MSCD Alumni Association: Fall 2011/Spring 2012 - Volunteer Graduation Ceremony
3. Our Lady of Guadalupe Church - Fiesta Volunteer (Candy Booth) 07/2011

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

Name	Address	Phone Number
Professor Judith Wonstolen, MSCD Women's Studies,	(303) 914-8132, jwonstolen@msn.com	
Professor Larry Botnick, CSU PhD, Candidate Social Work	- 303-556-6272 botnickl@mscd.edu	
Mercedes Salazar, MSCD Chicana/o Studies	(303) 556-3124, (303) 455-4098 msalaz27@mscd.edu	

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.

Christina M. Sigala, 5/10/2012
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

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 Women's Commission

Last Name: Irivarren First Name: Maria

Occupation/Employer: Denver Public Schools

Work Address: 900 Grant Street City: Denver Zip: 80203

Work E-mail Address: maria_irivarren@dpsk12.org

Work Phone: 720 423-2070 Work/Home Fax: _____

Home Address: 1755 S. Beeler St., 5Q City: Denver Zip: 80247

Home Phone: 720 309-8649 Cell Phone/ Pager: _____

Home E-mail Address: irivarren@hotmail.com

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

Denver City Council District No.: _____ Ethnicity (Optional) Latina

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

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

- La Conexión 2005,
- Mayor's Latino Commission 2006,
- Focus Point Family Resource Center 2007
- Urban Leadership Program 2010-2011

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

Name	Address	Phone Number
<u>Crisanta Duran</u>	_____	<u>720 296-2928</u>
<u>Jesse Ogas</u>	_____	<u>303 912-6686</u>
<u>Gene Lucero</u>	_____	<u>303 888-9198</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.

Signature

Date

Return Completed Form to:

Anthony Aragon, Director of Boards and Commissions
City and County of Denver Building, Room 350
Denver, CO 80202 Phone: (720) 865-9034 Fax: (720) 865-8787
Anthony.aragon@denvergov.org

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 Women's Commission

Last Name: Martinez First Name: Terrie

Occupation/Employer: Financial Advisor/Merrill Lynch

Work Address: 370 17th St. #5500 City: Denver Zip: 80202

Work E-mail Address: terrie.martinez@ml.com

Work Phone: 303-446-5563 Work/Home Fax: _____

Home Address: 901 Colorado Blvd. #216 City: Denver Zip: 80206

Home Phone: _____ Cell Phone/ Pager: 720-635-8088

Home E-mail Address: terrielmartinez@gmail.com

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

Denver City Council District No.: 10 Ethnicity (Optional) Hispanic

Highest Level of Education or Degree Earned: BS Year Completed: 1986

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

Board Member-Denver Hispanic Chamber Education Foundation, Mi Casa Resource Center
Member-Circle of Latina Leadership (Alumni Chair), Women's Vision Foundation (Twitter Manager),
University of Denver Latino Alumni Assn., Colorado Women's Chamber (ATHENA Award Nominee),
Assn. Latino Professionals in Finance & Acct., Colorado Planned Giving Roundtable, Who's Who
Among Executive and Professionals, Merrill Lynch Women's Exchange Leadership Team
Volunteer- Second Wind Fund, Goodwill Industries, LARAZA Youth Conference, Santos Basket
Drive, Broadway Assistance Center, Habitat for Humanity, Junior Achievement

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

Name	Address	Phone Number
<u>Debbie Trujillo</u>	<u>6565 E. 73rd Ave Commerce City, CO 80022</u>	<u>(303) 227-0932</u> <i>HISPANIC CHAMBER</i>
<u>James Perez-Foster</u>	<u>2020 20th St. Boulder, CO 80302</u> <i>Solara Bank</i>	<u>(303) 521-5050</u> <i>BBB</i>
<u>Jeffrey Howard</u>	<u>2190 E Asbury Ave. Denver, CO 80208</u>	<u>7501 (303) 513-1628</u> <i>DU</i>

Special Information: Widow, Alumni Relations

Is there anything that would adversely affect public confidence in your appointment or service? Yes
If yes, please explain on a separate sheet of paper.

Terrie Martinez 06/15/12
Signature Date

Return Completed Form to:

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 Women's Commission

Last Name: Tafoya First Name: Amber

Occupation/Employer: Attorney, US Department of Labor Office of the Solicitor MBLP

Work Address: 1999 Broadway St., Ste 800 City: Denver Zip: 80202

Work E-mail Address: tafoya.amber.j@dol.gov

Work Phone: (303) 844-0973 Work/Home Fax: (303) 844-0982

Home Address: 71 S. Newton St. City: Denver Zip: 80219

Home Phone: NA Cell Phone/ Pager: (720) 371-7496

Home E-mail Address: ambertafoya@gmail.com

Are you a registered voter? Yes If so, what county? Denver

Denver City Council District No.: 3 Ethnicity (Optional) Latina

Highest Level of Education or Degree Earned: Juris Doctor Year Completed: 2002

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

Del Norte Board of Directors, One World One Water Metro University of Denver Advisory Board, US Army Recruitment Advisory Board, COBALT Bar Leadership Training Class of 2012, Co. Latino Leadership, Advocacy, and Research Organization (fka LARASA) volunteer, Nuestro Rio Colorado Steering Committee, CBA, CHBA, DBA, CTLA, past member of the CWBA, ADL Glass Partners in Leadership Class of 2010, Co. Progressive Leaders - 2009, Co. Women's Lobby board member 2008-2010, Ya Es Hora steering committee 2007-2011, Circle of Latina Leadership mentor 2009

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

Name	Address	Phone Number
<u>Scott Field</u>	<u>1437 Bannock St., #3, Denver, CO 80203</u>	<u>720-865-7604</u>
<u>Olivia Mendoza</u>	<u>309 W. 1st St., Denver, CO 80223</u>	<u>303-722-5150</u>
<u>Veronica Barela</u>	<u>901 W. 10th Ave., 2A, Denver, CO 80204</u>	<u>303-534-8342X102</u>

Special Information:

Is there anything that would adversely affect public confidence in your appointment or service? No
If yes, please explain on a separate sheet of paper.

Signature

Date

Return Completed Form to:

Anthony Aragon, Director of Boards and Commissions
City and County of Denver Building, Room 350

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 Women's Commission

Last Name: Gheiler First Name: Perla

Occupation/Employer: Marketing * American Family Insurance [9 years]

Work Address: 9510 Meridian Blvd City Englewood Zip: 80112

Work E-mail Address: pgheiler@amfam.com

Work Phone: (720) 810-7274 Work/Home Fax: _____

Home Address: 3560 Tejon St. City: Denver Zip: 80211

Home Phone: _____ Cell Phone/ Pager: (303) 589-5309

Home E-mail Address: pgheiler@aol.com

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

Denver City Council District No.: #9 Ethnicity Hispanic/Latina

Highest Level of Education or Degree Earned: BA Comm Year Completed: 2005

Memberships/ Organizations/ Volunteer Activities (include past or present): Assoe. 1992
Hispanic Chamber of Commerce of Metro Denver
Highland United Neighbors Inc.
Colorado Women's Chamber of Commerce

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

Name	Address	Phone Number
<u>Elaine D. Torres</u>	<u>CBS4-1044 Lincoln St. Denver</u>	<u>80203 (303) 830-6510</u>
<u>Dr. Stephen Jordan</u>	<u>Metrostate Campus Box 1, PO Box 173362, Denver</u>	
<u>Keith Montoya</u>	<u>Doc 1 Solutions</u> <u>110 16th St., A950 Denver</u>	<u>(720) 289-2105</u>

Special Information: 80217
(303) 556-3022

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

Perla Gheiler 5/1/2012
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

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: Women's Commission

Last Name: Vie-Carpenter First Name: Robyn

Occupation/Employer: Entrepreneur/Owner Fire Hawk Industries, Inc.

Work Address: 1616 14th Street, Suite 3A City: Denver Zip: 80202

Work E-mail Address: robyn@firehawkindustriesinc.com

Work Phone: 720-270-9966 Work/Home Fax: _____

Home Address: 11239 Lamar Street City: Broomfield Zip: 80020

Home Phone: _____ Cell Phone/ Pager: _____

Home E-mail Address: robynvie.inc@gmail.com

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

Denver City Council District No.: _____ Ethnicity A-A

Highest Level of Education or Degree Earned: AA Year Completed: 2001

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

Girls Pushing the Button, board member Denver Dollhouse, Secretary, Wells Fargo LGBT

Teammember Group, Hospitality Volunteer SWISH Women's Final Four Weekend

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

Name	Address	Phone Number
<u>Matthew Quinn</u>	<u>1616 14th Street, #3A, Denver, 80202</u>	<u>303-862-0074</u>
<u>Lynette Elliot</u>	_____	<u>720-982-5445</u>
<u>Morris Price, Jr.</u>	<u>Diana DeGette Dist Office 600 Grant, Ste 202 Denver, 80203</u>	<u>303-870-4459</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.

Robyn Vie-Carpenter June 20, 2012
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