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: January 30, 2013
Please mark one:		☐ Bill Request	or	XX	Resolution Requ	uest
1.	Has your agency s	ubmitted this request in	the last 1	2 mont	hs?	
	☐ Yes	XX No				
	If yes, please	explain:				
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.)					
	Michelle Perez					I the appointments of Floyd Grinsell and we immediately and expiring on July 11, 2014
3.	Requesting Agenc	y: Mayor's Office				
4.	■ Name: Antho ■ Phone: 720-8			l ordina	nce/resolution.)	
5.	will be available for Name: Anthor Phone: 720-8	<i>r first and second readin</i> ony Aragon	g, if necess		ace/resolution <u>who</u>	will present the item at Mayor-Council and who
6.	General description	on of proposed ordinanc	e includin	g contr	act scope of work	if applicable:
	[Insert general	description here.]				
		following fields: (Incomp – please do not leave bla		may res	rult in a delay in pr	ocessing. If a field is not applicable, please
	a. Contract	Control Number:				
	b. Duration:		ediately and	d expirii	ng July 11, 2014	
	c. Location:	Council District:				
	d. Affected (e. Benefits:	Council District:				
	f. Costs:					
7.	Is there any contrexplain.	oversy surrounding this	ordinance	e? (Gro	ups or individuals	who may have concerns about it?) Please
	Start typing h	ere.]				
		,				
		To b	e complete	d by Mo	nyor's Legislative	Team:
SII	RE Tracking Number	**			Date	e Entered:

Boards and Commissions - Applicant Information

Printed Date: 01-30-2013

Prefix: UNDECLARED Last Name: HART First Name: NIABI Middle Name:

Applicant\Appointee Record Id: 3399 Date Last Modified: April-19-2011 12:55:55 PM MDT App Deleted Flag:

Occupation:

Employer: TENNYSON CENTER FOR CHILDREN

Work Email:

Work Address: 2950 TENNYSON ST

Work City: DENVER Work State: CO Work Zip: 80212 Work Zip Ext: Work Phone: Work Phone Ext: Work Fax: Work Cell Phone:

Home Email: NIABI.HART@GMAIL.COM Home Address: 4555 W. 8TH AVENUE

Home City: DENVER Home State: CO Home Zip: 80204 Home Zip Ext:

Home Phone: Home Cell Phone: 720-249-6463

Birth Date: July-04-2776 12:00:0 Gender: UNDECLARED 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: April-19-2011 12:55:55 PM 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: 4536 BoardName: DENVER AMERICAN INDIAN COMMISSION Delete Flag: N

Status: MEMBER Reason: APPOINTED Start Date: 04-14-2011 End Date: NONE Tech Date: 01-11-2013

Resolution: Addendum:

Date Printed: 01-30-2013 Page 1 of 1

Boards and Commissions - Applicant Information

Printed Date: 01-30-2013

Prefix: UNDECLARED Last Name: RED ELK First Name: ROSE Middle Name:

Applicant\Appointee Record Id: 3400 Date Last Modified: April-19-2011 12:57:20 PM MDT App Deleted Flag:

Occupation:

Employer: ENTERTAINER, STORYTELLER

Work Email:

Work Address: P.O. BOX 824

Work City: LONGMONT Work State: CO Work Zip: 80502 Work Zip Ext:

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

Home Email: ROSE@REDFEATHERWOMAN.COM Home Address: 6670 RABBIT MOUNTAIN ROAD

Home City: LONGMONT Home State: CO Home Zip: 80502 Home Zip Ext:

Home Phone: 303-579-8713 Home Cell Phone:

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: April-19-2011 12:57:20 PM 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: 4537 BoardName: DENVER AMERICAN INDIAN COMMISSION Delete Flag: N

Status: MEMBER Reason: APPOINTED Start Date: 04-14-2011 End Date: NONE Tech Date: 01-11-2013

Resolution: Addendum:

Date Printed: 01-30-2013 Page 1 of 1

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 American Indiam Commission
Last Name: Grinsell First Name: Floyd
Occupation/Employer: Custadian / City & County of Denver
Work Address: 1437 Bannock City: Denver Zip:
Work E-mail Address:
Work Phone: 720 - 334 - 626 6 Work/Home Fax:
Home Address: P.O. Box 351240 City: Westminster Zip: 80031
Home Phone: Cell Phone/ Pager:
Home E-mail Address: farinsell@yahoo.com
Are you a registered voter? Yes No If so, what county?
Denver City Council District No.:9
Ethnicity/Tribal Affiliation(s) (Optional) American Indian Northern Cheyenn
Highest Level of Education or Degree Earned: <u>H.S. Diploma</u> Year Completed: <u>I 2</u>
Memberships/ Organizations/ Volunteer Activities (include past or present):
Non-prof.t Board Member PPCD (People's Partners
For Community development) Lame Deer, MT
References (List three persons, not related to you, whom you have known at least one year): Name Address Phone Number
Raul Caballero 5567 S. Grant St. # 720-987-4228
Cambria Serrano 4810 Raritan St. 720-903-6931
Steve Vigil 303-526-6483
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) 865-9032 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 American Indian Commission						
Last Name: PEREZ First Name: MICHELLE						
Occupation/Employer: Denver Indian Center/dance Instructor						
Work Address: 4407 Movison Relativ: Denver Zip: 80219						
Work E-mail Address: typewriterblue 21@ gmail com						
Work Phone: 720-837-546/ Work/Home Fax:						
Home Address: 3748 Fenton St City: Wheat Ridge Zip: 80212						
Home Phone: 720-837-5461 Cell Phone/ Pager:						
Home E-mail Address: typewriterblue 2/Camail.com						
Are you a registered voter? (es) No If so, what county? Denver						
Denver City Council District No.: ?						
Ethnicity/Tribal Affiliation(s) (Optional) Chumash / Appache						
Highest Level of Education or Degree Earned: HS diploma Year Completed:						
Memberships/ Organizations/ Volunteer Activities (include past or present):						
Executive Director - The Medicine Heart Dancers 200-present						
Denver Indian Center - pow-wow goordinator						
References (List three persons, not related to you, whom you have known at least one year): Name Address Physical References (List three persons, not related to you, whom you have known at least one year):						
The state of the s						
Dina Vannia 100000						
11 11 11 11 11 11 11 11 11 11 11 11 11						
VICKI STOTT OXFAM OVERSEAS 303-519-6616 Special Information:						
Is there anything that would adversely affect public confidence in Journal of Confidence in Jour						
ti yes, please expirin 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) 865-9032 Fax: (720) 865-8787						