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: Ju	ly 24, 2014
Ple	ease mark one:	☐ Bill Request	or		XX Reso	lution Requ	est	÷		
1.	Has your agency s	submitted this request i	n the last	12 n	nonths?					
	☐ Yes	XX No								
	If yes, please	explain:								
2.		oncise, one sentence des ates the type of request: ¿ est, etc.)								rol number
٠		e Mayoral appointment on expiring on Septembe						an Commiss	ion for a terr	m effective
3.	Requesting Agenc	y: Mayor's Office						•		
.4.	■ Name: Antho ■ Phone: 720-8			d or	dinance/res	olution.)				
5.	will be available fo Name: Antho Phone: 720-8		ng, if neces.			olution <u>who w</u>	vill present i	the item at M	layor-Counc	<u>il and who</u>
6.	General description	on of proposed ordinan	ce includir	ng c	ontract sco	pe of work i	f applicable	e:		-
	[Insert general	description here.]		·			-			
		following fields: (Incomp – please do not leave bla		may	y result in a	delay in pro	cessing If	a field is not	applicable, j	please
	a. Contract	Control Number:								
	b. Duration:	Terms effective imme	ediately an	ıd ex	pire on Sep	tember 26, 2	015			
	c. Location:									
		Council District:	٠							
	e. Benefits:									
	f. Costs:									
7.	Is there any contro	oversy surrounding this	s ordinanc	:e? (Groups or	individuals w	ho may hav	e concerns a	bout it?) PI	ease
	[Start typing he	ere.]								•
		,								
						•				
		T- 1	10.00		Monaria	agielativa Ta				<u> </u>
			e compiete	eu vy	viayor's L	egislative Te				
SH	RE Tracking Number					Date I	Entered:			

BOARDS AND COMMISSIONS APPLICATION



Please complete the following information in full and return with your current resume or biography to the address below.

	T	ype or print in blue or bl	ack ink.	
·	Last Name: Jimmer 507	First Name: _(Extension - Den IIP Ave City: JIMMERSON Den		ig
rently n	Home Address: 568 Name 5 Home Phone: 720-277-4 Home E-mail Address: Yes Colorado ID or Driver's License Nu Denver City Council District No.:	1168 Cell Phone/ F 14y dy varies denve No If so, what coun mber: 98-021-1188	Pager:	
	African American Philan	teer Activities (include pas Leadership Couc Aropist, Colorado		
(Councilian Albus brooks Councilian Albus brooks Lunt Centell Special Information: Is there anything that would adverse If yes, please explain on a separate	Tremont Emerson 64. Paul ly affect public confidence e sheet of paper. Signature	303 - 946 - 4817 $720 - 337 - 8888$ $303 - 839 - 4804$ $706 - 627 - 8598$ in your appointment or service? Yes No	
	Detum Completed Form to	-		

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