

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 15, 2013

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 appointments of Diane Young, Faye Rison and William Williams to the Denver Commission on Aging for terms effective immediately and expiring August 31, 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 expiring August 31, 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: _____

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: COMMISSION ON AGING

Last Name: Young First Name: Diane M.I. O.

Occupation/Employer: Aide To Councilwoman Peggy Lehmann

Work Address: 3540 S. Poplar ST #102 City: Denver Zip: 80237

Work E-mail Address: diane.young@denvergov.org

Work Phone: 720-337-4444 Work/Home Fax: ~~303-759-3437~~

Home Address: 3983 S. Olive ST City: Denver Zip: 80237

Home Phone: 303-759-3921 Cell Phone/ Pager: _____

Home E-mail Address: dioyoung@comcast.net

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

Denver City Council District No.: 4 Ethnicity white

Highest Level of Education or Degree Earned: Bachelor's degree Year Completed: 1966

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

2007-2011 - Community representative To Bradley International Schools CSC (collaborative School Committee)

1996-2002 - Board member - Rocky Mountain Stroke Assoc. Chair of ^{5K} Race Committee

Board member and President - League of Women Voters of Denver 1977-1985

Application Form

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: Aging

Last Name: Rison First Name: Faye

Occupation/Employer: Retired College Professor

~~Work Address: _____ City: _____
Zip: _____~~

~~Work E-mail Address: _____~~

~~Work Phone: _____ Work/Home Fax: _____~~

Home Address: 8792 E. Kent Place City: Denver CO
Zip: 80237

Home Phone: 303-773-6852 Cell Phone/ Pager: 303-947-0402

Home E-mail Address: drfaye@Comcast.net

Denver Boards and Commissions

Search for Services, locate city offices, more.

Denver Boards and Commissions

Application Form
BOARDS AND COMMISSIONS APPLICATION

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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: Child Advocacy Center

Last Name: WILLIAMS First Name: L. WILLIAM

Occupation/Employer: Advisor and Liaison
also security to former Gov. of N.Y.

Work Address: Retired City: _____
Zip: _____ Since 2000

Work E-mail Address: _____

Work Phone: _____ Work/Home Fax: _____

Home Address: 7131 City: Denver
Zip: 80207

Home Phone: 303 355 1531 Cell Phone/Pager: _____

Home E-mail Address: NA