

## ORDINANCE/RESOLUTION REQUEST

Please email requests to the Mayor's Legislative Team  
at [MileHighOrdinance@DenverGov.org](mailto: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: August 23, 2022**

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.)

Approves the Mayor appointments of the following individuals to the Denver Commission on Aging:

Thomas Clark, Denver (M)(C) to serve for a term expiring August 31, 2025 and occasioned by the resignation of Kesia Culbertson, appointed;

R. Jo Bunton Keel, Denver (F)(AA) for a term expiring August 31, 2025, appointed.

**3. Requesting Agency:** Mayor's Office of Boards and Commissions

**4. Contact Person:** (With actual knowledge of proposed ordinance/resolution.)

- **Name:** Romaine Pacheco
- **Phone:** 720.865.9085
- **Email:** [romaine.pacheco@denvergov.org](mailto:romaine.pacheco@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:** Romaine Pacheco
- **Phone:** 720.849.7935
- **Email:** [romaine.pacheco@denvergov.org](mailto:romaine.pacheco@denvergov.org)

**6. General description of proposed ordinance including contract scope of work if applicable:**

Appointment of members to Denver Commission on Aging .

**\*\*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:**
- 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.**

*To be completed by Mayor's Legislative Team:*

SIRE Tracking Number: \_\_\_\_\_

Date Entered: \_\_\_\_\_