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: November 21, 202
Please mark one:		☐ Bill Request	or	⊠ Resol	ution Request
1.	Has your agency s	ubmitted this request in	the last 12	2 months?	
	☐ Yes	⊠ No			
	If yes, please e	xplain:			
2.		tes the type of request: g			name of company or contractor and contract control number ct execution, amendment, municipal code change,
	To approve the Mayoral reappointment of the following individual to the National Western Center Authority Board of Directors:				
	John Ikard, Litt	tleton, (M)(C) for a term	expiring De	ecember 31, 2	2027, reappointed.
3.	Requesting Ag	gency: Mayor's Offi	ce of Board	ds and Comm	issions
4.	 Contact Person: (With actual knowledge of proposed ordinance/resolution.) Name: Romaine Pacheco Phone: 720.865.9085 Email: 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				
6.	General description	n of proposed ordinanc	e including	g contract sc	ope of work if applicable:
		f ollowing fields: (Incomp - please do not leave blar		nay result in	a delay in processing. If a field is not applicable, please
	a. Contract	Control Number:			
	b. Duration:				
	c. Location:				
		Council District:			
	e. Benefits:				
7.	f. Costs:	oversy surrounding this	ordinance	? (Groups or	individuals who may have concerns about it?) Please
·•	explain.	versy surrounding this	or dinance	(Groups or	individuals who may have concerns about it.) Trease
	None				
		To be	completea	d by Mayor's	Legislative Team:

SIRE Tracking Number: _____

Date Entered: