ORDINANCE/RESOLUTION REQUEST

Please email requests to the Mayor's Legislative Team at <u>MileHighOrdinance@DenverGov.org</u> by **3:00pm on** <u>Monday</u>.

All fields must be completed.

Incomplete request forms will be returned to sender which may cause a delay in processing.

				Date of Reque	est: December 15, 2022
Ple	ase mark one:	Bill Request	or	Resolution Request	
1. Has your agency submitted this request in the last 12 months?					
	Yes	🖂 No			
	If yes, please e	xplain:			
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.)				
	To approve the Mayoral appointment of the following individual to the Commission for People with Disabilities:				
	Elena Mendoza, Denver (F)(H) for a term expiring September 30, 2024, 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 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 of proposed ordinance including contract scope of work if applicable:					
**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.)					
7.	b. Duration:c. Location:d. Affected Ce. Benefits:f. Costs:	Control Number: Council District: wersy surrounding this	s ordinance	e? (Groups or individuals who may have concerns a	ubout it?) Please