ORDINANCE/RESOLUTION REQUEST

						Date of Request: 11/18/	16
Ple	ase mark	one:	☐ Bill Reque	est	or	⊠ Resolution Request	
1.	Has you	r agency su	bmitted this req	uest in the	last 12	12 months?	
		Yes	⊠ No				
	If yo	es, please ex	xplain:				
2.	SOCSV- for up to	2016-31653 70 women j	with a cost of \$8	800,000. F	unds a	ties and Community Services, Inc., through contract control number are paid through mill levy funding, to provide emergency shelter services d in moving to more stable housing to prevent further unemployment,	
	4045 Pec	Charities ar cos Street Colorado 80	nd Community Se 0211	ervices, Inc.			
3.	Request	ing Agency	: Denver Depart	ment of H	uman S	n Services	
4.	■ Pho	ne: Ron M ne: 720-94		ov.org			
5.	Contact Person: Name: Ron Mitchell Phone: 720-944-29032 Email: Ron. Mitchell						
	Catholic	Charities to		ncy shelter f	or hon	cluding contract scope of work if applicable: Requests a new contract with omeless adult women, maintain a safe and respectful shelter environmenting.	th
	a. Con	tract Conti	ol Number:	SOCSV-	-2016-3	5-31653	
	b.	Duration:	Funding duration	on (1/1/201	7 – 12/	2/31/2017)	
	c.	Location:	Denver Human	Services			
			ouncil District:	All			
	e. hous	Benefits:	Provides emerg	gency shelte	r for h	homeless adult women in order to succeed in moving to more stable	
	f.	Costs: \$8	00,000				
7.	Is there	any contro	versy surroundii	ng this ordi	inance	ce? Please explain. No	
				To be con	npletea	ed by Mayor's Legislative Team:	
CIE	F Trackir	og Number				Date Entered:	