

Ordinance/Resolution Request

Please email requests to the Mayor’s Legislative Team

at MileHighOrdinance@DenverGov.org by **3:00pm on Monday**. Contact the Mayor’s Legislative team with questions

Date of Request: December 10, 2018

Please mark one: **Bill Request** or **Resolution Request**

1. Type of Request:

- Contract/Grant Agreement** **Intergovernmental Agreement (IGA)** **Rezoning/Text Amendment**
 Dedication/Vacation **Appropriation/Supplemental** **DRMC Change**
 Other:

2. Title: (Start with *approves, amends, dedicates*, etc., include name of company or contractor and indicate the type of request: grant acceptance, contract execution, contract amendment, municipal code change, supplemental request, etc.)

Ordinance Request – Prohibition of Gender Conversion Therapy

3. Requesting Agency: Human Rights & Community Partnerships

4. Contact Person:

Contact person with knowledge of proposed ordinance/resolution	Contact person to present item at Mayor-Council and Council
Name: Anthony Aragon	Name: Derek Okubo
Email: Anthony.aragon@denvergov.org	Email: Derek.Okubo@denvergov.org

5. General description or background of proposed request. Attach executive summary if more space needed:

Conversion therapy – sometimes referred to as “reparative therapy,” “ex-gay therapy,” or “sexual orientation change efforts” includes a range of dangerous & discredited practices aimed at changing a person’s sexual orientation or suppressing a person’s gender identity.

These harmful practices are based on the false claim that being lesbian, gay, bisexual, transgender or queer is a mental illness that should be cured. Every mainstream mental health & medical professional association in the country has rejected this view as scientifically invalid.

6. City Attorney assigned to this request (if applicable):

Victoria Aguilar, Assistant City Attorney. Sr., Municipal Operations

7. City Council District:

City-wide

8. **For all contracts, fill out and submit accompanying Key Contract Terms worksheet**

To be completed by Mayor’s Legislative Team:

Resolution/Bill Number: BR18 1508

Date Entered: _____

Key Contract Terms

Type of Contract: (e.g. Professional Services > \$500K; IGA/Grant Agreement, Sale or Lease of Real Property):

Vendor/Contractor Name:

Contract control number:

Location:

Is this a new contract? Yes No Is this an Amendment? Yes No If yes, how many? _____

Contract Term/Duration (for amended contracts, include existing term dates and amended dates):

Contract Amount (indicate existing amount, amended amount and new contract total):

<i>Current Contract Amount</i> (A)	<i>Additional Funds</i> (B)	<i>Total Contract Amount</i> (A+B)
<i>Current Contract Term</i>	<i>Added Time</i>	<i>New Ending Date</i>

Scope of work:

Was this contractor selected by competitive process?

If not, why not?

Has this contractor provided these services to the City before? Yes No

Source of funds:

Is this contract subject to: W/MBE DBE SBE XO101 ACDBE N/A

WBE/MBE/DBE commitments (construction, design, Airport concession contracts):

Who are the subcontractors to this contract?

To be completed by Mayor's Legislative Team:

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