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

Please mark one: Bill Request or	Date of Request: 11/03/2020 X Resolution Request
1. Type of Request:	A Resolution Request
	greement (IGA) Rezoning/Text Amendment
☐ Dedication/Vacation ☐ Appropriation/Suppl	lemental DRMC Change
Other:	
2. Title: (Start with <i>approves, amends, dedicates</i> , etc., include acceptance, contract execution, contract amendment, muni	name of company or contractor and indicate the type of request: grant cipal code change, supplemental request, etc.)
	nily Star Inc. for full funding in the amount of \$561,971.00 to provide of kids served: 54. Adding dollars for a cost of living adjustment,
3. Requesting Agency: Office of Children's Affairs 4. Contact Person:	
Contact person with knowledge of proposed ordinance/resolution	Contact person to present item at Mayor-Council and Council
Name: Al Martinez	Name: Al Martinez
■ Email: <u>Al.Martinez@denvergov.org</u>	Email: Al.Martinez@denvergov.org
 5. General description or background of proposed request Amend (#2) the Family Star Inc a delegate agency contract in Head Start services to 54 children, ages 0 to 5 years old for 6. City Attorney assigned to this request (if applicable): N 	the amount of \$561,971.00 to provide comprehensive Head Start/Early r the period beginning July 1, 2020 thru June 30, 2021.
7. City Council District: 3, 5, 8, 9	
8. **For all contracts, fill out and submit accompanying I	Kev Contract Terms worksheet**
To be completed by	Mayor's Legislative Team:

Resolution/Bill Number: RR20 1342

Revised 03/02/18

Date Entered:

endor/Contractor Name: Family Star Inc		
ontract control number: 202056406		
ocation: District 1, 2, 3, 4, 5, 9		
s this a new contract? Yes No Is this ar	n Amendment? ⊠ Yes □ No	o If yes, how many? _2
ontract Term/Duration (for amended contracts, i	nclude <u>existing</u> term dates and	amended dates): 7/1/2020-06/30/2021
Contract Amount (indicate existing amount, amen	ded amount and new contract to	otal):
Current Contract Amount	Additional Funds	Total Contract Amount
(A)	(B)	(A+B)
\$429,882.00	\$132,089	\$561,971
Current Contract Term	Added Time	New Ending Date
Vas this contractor selected by competitive process	s? YES If not ,	why not?
		why not?
Has this contractor provided these services to the C		why not?
Has this contractor provided these services to the Cource of funds: Head Start Federal Grant	City before? Yes No	
Was this contractor selected by competitive process Has this contractor provided these services to the Cource of funds: Head Start Federal Grant s this contract subject to: W/MBE DBE WBE/MBE/DBE commitments (construction, design	City before? ⊠ Yes □ No □ SBE □ XO101 □ AC	DBE 🛭 N/A
Has this contractor provided these services to the Cource of funds: Head Start Federal Grant s this contract subject to: W/MBE DBE	City before? ⊠ Yes □ No □ SBE □ XO101 □ AC	DBE 🛭 N/A
Tas this contractor provided these services to the Cource of funds: Head Start Federal Grant s this contract subject to: W/MBE DBE WBE/MBE/DBE commitments (construction, design	City before? ⊠ Yes □ No □ SBE □ XO101 □ AC	DBE 🛭 N/A
Has this contractor provided these services to the Cource of funds: Head Start Federal Grant s this contract subject to: W/MBE DBE WBE/MBE/DBE commitments (construction, designated) Who are the subcontractors to this contract? N/A	City before? ⊠ Yes □ No □ SBE □ XO101 □ AC	DBE ⊠ N/A

Date Entered: _____