

Legislative Review Form 4-028

Appl uither Review Form

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Agency: OES	Contact person	lde 1barra	Phone 3	-9651	
Ordinance Motion Prov	viso Report	Other			
Civil Division Prosecuting Attorney R	<u>leview</u>				
Name John Owberding Version Anal		l	Date 1- >-14		
Dept. Director or Designee Review					
Name Rull 4 barra	Version Ana	1	Date	201	
Performance Strategy & Budget Office Review					
Name NIA	Version		Date	CEIN CEIN	
Name Will Version The Date Performance Strategy & Budget Office Review Name NIA Version Date Technical Form/Code Reviser Review - Confirm adherence to legislative format Name Brue Uten Version find Date - 2-14					
Name Brue Retur	Version find		Date -7	-14 8	
Executive Office Review & Transmitta	al Approval				
Name Joe Woods	Version And	I	Date		
ENTRANCE CRITERIA REVIEW					
		EXEC OFFICE (initials) KCC CLERK			
Fiscal note? KC Strategic Plan reference in letter? Proof read for spelling and grammar? All pertinent attachments listed/labeled Costs identified/described in letter Regulatory Note Required and Complete Formatted/Delivered in word-searchable Potential Annexation Area (PAA) impact Advertising required? if yes, cite all per Any special circumstances affecting pro-	te? e doc format? cts identified? tinent code/laws.	Y NA NA CY		Y NA NA NO	

Other background information not included in transmittal letter, including explanation of impact to cities, county agencies, or stakeholders