

county agencies, or stakeholders

Legislative Review Form

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Agency: DNRP	/DO	Contact pe	rson Megan Sm	<u>iith</u> I	Phone 206	-263-9605	
Ordinance	Motion Pro	oviso 🔲	Report 🖂	Other			
Civil Division Prosecuting Attorney Review							
Name Joe Rochelle		Version	n Final	Ι	Date (41/25	
Name All	Designee Review	Version ce Review	n Final	Г	Date 1/2	2116 FEB -	RECEIVED /
Name John U	ualsn	Version	hnal		ate	I PM 3: 53	
Technical Form/Code Reviser Review - Confirm adherence to legislative format							
Name Bruce Ritze		Version			ate 1/	18/16	/
Executive Office Review & Transmittal Approval							
Name Michie			final	D	ate		
ENTRANCE CRITERIA REVIEW							
			EXEC	OFFICE (i	nitials)	KCC CLER	K
Fiscal note?			ΥΠ	NA 💢 S	V	NAM	
KC Strategic Plan	reference in letter?		YX	NA 🗆	V	NA	
Dec - f 1 f 11' 1				NA 🗆 🕻	Ÿ	NA	
All pertinent attachments listed/labeled?				NA 🗍 🕻	X	NA	
Costs identified/described in letter Y				NA 🗍 🕦	Y	NA	
Regulatory Note Required and Complete?				NA 🔀 🕻	Y		NO
Formatted/Delivered in word-searchable doc format?				NA 🗌 🔪	Y	NA	140
Potential Annexation Area (PAA) impacts identified?				NA 🔀 🕻	Y	NA NA	No
1 1 1				NA X	Y	□ NA □	No
				NA 💢 🗸	Y		No
Other background i	nformation not incl	uded in tran	nsmittal letter, in	cluding exp	lanation o	of impact to c	cities,