## **Legislative Review Form**



2016 2016 114

Agency: <u>DCHS</u>	Contact person Adri	enne Quinn_	Phone <u>263-9100</u>
Ordinance Motion	Proviso Report Report	_	_
Civil Division Prosecuting Attor			
Name Peggy Pahl	Version Final		Date 2/10/16
Dept. Director or Designee Revi	ew		Date 2/9/16  Date 2/9/16  Date 2/9/16  Date 2/9/16  Date 2/9/16  Date 2/9/16
Name Adrienne Quinn	Version Final		Date 2/9/16 PK COUNCIL
Performance Strategy & Budget	Office Review		6 E D
Name	Version	~	Date $\rightleftharpoons$ $\omega$
Technical Form/Code Reviser R	Leview – Confirm adheren	ce to legislative	e format
Name Bruce Ritzen	Version Final		Date 2/8/16
Executive Office Review & Tra	nsmittal Approval		
Name	Version		Date
	ENTRANCE CRITER	The state of the s	
		EXEC OFFIC	CE (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 doc format?  Potential Annexation Area (PAA) impacts identified?  Advertising required? if yes, cite all pertinent code/laws.  Any special circumstances affecting processing time?		Y □ NA □ N	Y NA NA NO Y NA NA NO Y NA NA NO Y NA NA NO

Other background information not included in transmittal letter, including explanation of impact to cities, county agencies, or stakeholders Fiscal notes attached, but no fiscal impact