By He

county agencies, or stakeholders

Legislative Review Form

thaulicha

King County	w		6	203			
Agency: DES/FMD Co	ntact person Ant	thony W	right	Phone	477-93:	52	- 6
Ordinance Motion Provis	o Report [Other []			
Civil Division Prosecuting Attorney Rev	view						
Name Tim Barnes	Version Final			Date Jan	uary 7, 20	016	
Dept. Director or Designee Review				(*)			
Name TOM HONEY CH	Version Final			Date (. 26:	16	-3
Performance Strategy & Budget Office F	Review						
Name Sid Bender	Version 6			Date format Date Dec	2	110	
Technical Form/Code Reviser Review -	Confirm adheren	ce to leg	islative	format	Y C0	至 3	
Name Bruce Ritzen	Version Final			Date Dec	ember 1	بي 1, 20 <u>1</u>	20
Executive Office Review & Transmittal	Approval						
Name Michelle Allison	Version 6 rm	(Date		ā	
ENTRA	ANCE CRITERI	A REV	<u>IEW</u>				
	.]	EXEC (FFICE	(initials)	KCC	CLER	K
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 perti	doc format? s identified? nent code/laws.	Y 🔀 Y 🛣 Y 📉 Y 📉 Y 🖂 Y 🖂 Y 🖂 Y 🖂 Y 🖂 Y 🖂 Y 🖂	NA D NA D NA D NA NA NA D NA NA NA D			NA	No No
Any special circumstances affecting proc	essing time?	Y	NA 🔀		Y	NA 🗌	NO.

Other background information not included in transmittal letter, including explanation of impact to cities,