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STW for  
Kent School  
District

# Legislative Review Form



**King County**

2015-007

Agency: KCSO Contact person Robin Rask Phone 263-2547

Ordinance  Motion  Proviso  Report  Other

### Civil Division Prosecuting Attorney Review

Name: John Gerberding Version \_\_\_\_\_ Date 8/1/2015

### Dept. Director or Designee Review

Name: Sheriff John Urquhart Signature  Version \_\_\_\_\_ Date 9/29/15

### Performance Strategy & Budget Office Review

Name ~~Bruce~~ Andy Bauke Version final Date \_\_\_\_\_

### Technical Form/Code Reviser Review – Confirm adherence to legislative format

Name: Bruce Ritzen Version \_\_\_\_\_ Date 8/20/2015

### Executive Office Review & Transmittal Approval

Name Michelle Allison Version final Date \_\_\_\_\_

RECEIVED  
DEC 15 PM 4:04  
KING COUNTY COUNCIL CLERK

## ENTRANCE CRITERIA REVIEW

	EXEC OFFICE (initials)		KCC CLERK	
Fiscal note?	Y <input checked="" type="checkbox"/>	NA <input type="checkbox"/>	Y <input checked="" type="checkbox"/>	NA <input type="checkbox"/>
KC Strategic Plan reference in letter?	Y <input checked="" type="checkbox"/>	NA <input type="checkbox"/>	Y <input checked="" type="checkbox"/>	NA <input type="checkbox"/>
Proof read for spelling and grammar?	Y <input checked="" type="checkbox"/>	NA <input type="checkbox"/>	Y <input checked="" type="checkbox"/>	NA <input type="checkbox"/>
All pertinent attachments listed/labeled?	Y <input checked="" type="checkbox"/>	NA <input type="checkbox"/>	Y <input checked="" type="checkbox"/>	NA <input type="checkbox"/>
Costs identified/described in letter	Y <input type="checkbox"/>	NA <input checked="" type="checkbox"/>	Y <input type="checkbox"/>	NA <input type="checkbox"/>
Regulatory Note Required and Complete?	Y <input type="checkbox"/>	NA <input checked="" type="checkbox"/>	Y <input type="checkbox"/>	NA <input type="checkbox"/>
Formatted/Delivered in word-searchable doc format?	Y <input checked="" type="checkbox"/>	NA <input type="checkbox"/>	Y <input checked="" type="checkbox"/>	NA <input type="checkbox"/>
Potential Annexation Area (PAA) impacts identified?	Y <input type="checkbox"/>	NA <input checked="" type="checkbox"/>	Y <input type="checkbox"/>	NA <input type="checkbox"/>
Advertising required? if yes, cite all pertinent code/laws.	Y <input type="checkbox"/>	NA <input checked="" type="checkbox"/>	Y <input type="checkbox"/>	NA <input type="checkbox"/>
Any special circumstances affecting processing time?	Y <input type="checkbox"/>	NA <input checked="" type="checkbox"/>	Y <input type="checkbox"/>	NA <input type="checkbox"/>

NO  
NO  
NO  
NO

Other background information not included in transmittal letter, including explanation of impact to cities, county agencies, or stakeholders. None