

Bfm

2014-403

# Legislative Review Form

PROP tax  
Levy for  
Collection  
in 2015  
#1



## King County

Agency: OEFA Contact person Dave Reich Phone 206-477-3410

Ordinance  Motion  Proviso  Report  Other

### Civil Division Prosecuting Attorney Review

Name Peggy Pahll Version Final Date 9/11/2014

### Dept. Director or Designee Review

Name Dave Reich Version Final Date 9/2/2014

### Performance Strategy & Budget Office Review

Name Aaron Rubardt Version Final Date 9/15/2014

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

Name Bruce Ritzen Version Final Date 9/15/2014 ✓

### Executive Office Review & Transmittal Approval

Name Joe Woods Version Final Date

RECEIVED  
2014 SEP 22 PM 12:41  
CLERK  
KING COUNTY COUNCIL

### 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 checked="" 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 checked="" 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"/>	No
Regulatory Note Required and Complete?	Y <input type="checkbox"/>	NA <input checked="" type="checkbox"/>	Y <input type="checkbox"/>	NA <input type="checkbox"/>	No
Formatted/Delivered in word-searchable doc format?	Y <input checked="" type="checkbox"/>	NA <input checked="" 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"/>	No
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"/>	No
Any special circumstances affecting processing time?	Y <input type="checkbox"/>	NA <input checked="" type="checkbox"/>	Y <input type="checkbox"/>	NA <input type="checkbox"/>	No

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