Legislative Review Form

2014-411

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county agencies, or stakeholders NA

Agency: PSB/DCHS	Contact person Kap	oena Pflum	Phone 206-263-9680
Ordinance Motion	Proviso Report	Other	
Civil Division Prosecuting Attorney Review			
Name Peggy Pahl	Version FINAL		Date 9/10/14
Dept. Director or Designee Revi	ew		7
Name Jonathan Swift	Version FINAL		Date 9/16/14  Date 9/10/14  Date 9/10/14  Date 9/10/14  Date 9/10/14  Date 9/10/14  Date 9/10/14  Date 9/10/14
Performance Strategy & Budget Office Review			
Name Kapena Pflum	Version FINAL		Date 9/10/14
Technical Form/Code Reviser Review - Confirm adherence to legislative format			
Name Bruce Ritzen	Version FINAL		Date 9/4/14
Executive Office Review & Transmittal Approval			
Name Joe Woods	Version FINAL		Date
ENTRANCE CRITERIA REVIEW			
		EXEC OFFIC	CE (initials) KCC ELERK
Fiscal note? KC Strategic Plan reference in le Proof read for spelling and gramma. All pertinent attachments listed/le Costs identified/described in lette Regulatory Note Required and C Formatted/Delivered in word-sea Potential Annexation Area (PAA Advertising required? if yes, cite Any special circumstances affects	mar? abeled? er omplete? rchable doc format? ) impacts identified? all pertinent code/laws.	Y NA NA CY NA NA CY	Y NA

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