

JMS  
COW  
Cabrera

# Legislative Review Form

labor agreement  
for legislative  
analyst



## King County

2015-014

Agency: Office of Labor Relations Contact person Gerry Topping Phone 263-8653

Ordinance  Motion  Proviso  Report  Other

### Civil Division Prosecuting Attorney Review

Name Susan Slonecker Version Final Date 10/26/15

### Dept. Director or Designee Review

Name Gerry Topping Version Final Date 12/11/15

### Performance Strategy & Budget Office Review

Name TJ Stelman Version final Date

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

Name Bruce Ritzen Version Final Date 10/21/15

### Executive Office Review & Transmittal Approval

Name Michelle Allison Version final Date

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2015 DEC 23 PM 3:29  
CLERK  
KING COUNTY COUNCIL

## ENTRANCE CRITERIA REVIEW

### EXEC OFFICE (initials) KCC CLERK

	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"/> 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 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