Legislative Review Form



2016-0 CARB

Agency: <u>DCHS</u>	Contact person	Adrienn	e Quinn P	hone <u>3-9</u>	100_		_
Ordinance Motion Prov	iso Repor	t 🔲	Other		-A.	2	
Civil Division Prosecuting Attorney Re	eview				30		ZE
Name Mike Sinsky	Version final		Da	ate 1-14		JAN 15	RECEIVED
Dept. Director or Designee Review					Y CO		ZE
Name Adrienne Quinn	Version final		Da	ite	COUNCIL	AM 9: 34	
Performance Strategy & Budget Office	Review						
Name N/A	Version		Date				
Technical Form/Code Reviser Review	- Confirm adhere	ence to leg	gislative form	nat			
Name Bruce Ritzen	Version final		Date				
Executive Office Review & Transmittal Approval							
Name MIchelle Allison	Version final		Date 1-14				
ENTE	RANCE CRITE	RIA REV	TEW				
	EXEC OFFICE (initials) KCC CLERK					RK	
Fiscal note?		ΥΠ	NA 🛛 🗸	Y		NA [7
KC Strategic Plan reference in letter?		Y	NA NA			NA [=
Proof read for spelling and grammar?		Y	NA 🗆 🗸			NA [=
All pertinent attachments listed/labeled?		Y	NA 🗆 🔻			NA [i
Costs identified/described in letter		Y	NA 🖂 🕻	Y		NA [i
Regulatory Note Required and Complete?		Y	NA 🖂 🕻	Y		NA [า์
Formatted/Delivered in word-searchable doc format?		Y	NA 🗍 🕻	Y		NA [i
Potential Annexation Area (PAA) impacts identified?		Y	NA 🖂 🕻	Y		NA [า์
Advertising required? if yes, cite all pertinent code/laws.		Y	NA 🗆 👣	Y		NA [ī
Any special circumstances affecting processing time?			NA 🖾 🕻	Y	Total Control of the	JA [i

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