

BPM
DU
WSH

Legislative Review Form

NON represented
Salary Ordinance
for GW1



King County

2018-482

Agency: PSB Contact person: Dwight Dively Phone: 206-263-9687

Ordinance Motion Proviso Report Other

Civil Division Prosecuting Attorney Review

Name Susan Slonecker Version Final Date 09/10/2018

Dept. Director or Designee Review

Name Dwight Dively Version Final Date 09/13/2018

Performance Strategy & Budget Office Review

Name Helene Ellickson Version Final Date 09/13/2018

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

Name Bruce Ritzen Version Final Date 09/07/2018

Executive Office Review and Transmittal Approval

Name Dwight Dively Version Final Date 9/24/18

RECEIVED
2018 SEP 24 AM 11:22
KING COUNTY CLERK
KING COUNTY COURTL

ENTRANCE CRITERIA REVIEW

EXEC OFFICE (initials) KCC CLERK

Fiscal note?	Y <input checked="" type="checkbox"/>	NA <input type="checkbox"/>	LW	Y <input checked="" type="checkbox"/>	NA <input type="checkbox"/>	
KC Strategic Plan reference in letter?	Y <input checked="" type="checkbox"/>	NA <input type="checkbox"/>	LW	Y <input checked="" type="checkbox"/>	NA <input type="checkbox"/>	
Proof read for spelling and grammar?	Y <input checked="" type="checkbox"/>	NA <input type="checkbox"/>	LW	Y <input checked="" type="checkbox"/>	NA <input type="checkbox"/>	
All pertinent attachments listed/labeled?	Y <input checked="" type="checkbox"/>	NA <input type="checkbox"/>	LW	Y <input checked="" type="checkbox"/>	NA <input type="checkbox"/>	
Costs identified/described in letter	Y <input type="checkbox"/>	NA <input checked="" type="checkbox"/>	LW	Y <input type="checkbox"/>	NA <input type="checkbox"/>	No
Regulatory Note Required and Complete?	Y <input type="checkbox"/>	NA <input checked="" type="checkbox"/>	LW	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"/>	LW	Y <input checked="" type="checkbox"/>	NA <input type="checkbox"/>	
Potential Annexation Area (PAA) impacts identified?	Y <input type="checkbox"/>	NA <input checked="" type="checkbox"/>	LW	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"/>	LW	Y <input type="checkbox"/>	NA <input type="checkbox"/>	No
Any special circumstances affecting processing time?	Y <input type="checkbox"/>	NA <input checked="" type="checkbox"/>	LW	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