

Legislative Review Form

Association

2019-069 (WTD, DNRP)

Agency: Office of Labor Relations	Contact person Meg	an Peder	sen Phone 20	63-2898	
Ordinance Motion Pro	oviso Report [	_ c	ther	 >===================================	29
Civil Division Prosecuting Attorney	Review			E 0	
Name Susan Slonecker Version Final			Date 12/2	CLERK COLBATY COUNCIL	CE CE
Dept. Director or Designee Review				YR COL	
Name Megan Pedersen	Version Final		Date 1/16	5/1里 5	
Performance Strategy & Budget Offi	ce Review				*
Name Hannah Burn	Version Final	* ×	Date /	1241	19
Technical Form/Code Reviser Review	w – Confirm adheren	ce to legi	slative format		
Name Bruce Ritzen	Version Final		Date 12/2	21/18	
Executive Office Review & Transmi	ttal Approval				
Name Shannon Braddock	Version Final		Date		
EN	TRANCE CRITER	IA REVI	IEW		
EXEC OFFICE (initials) KCC C					LERK
Fiscal note?  KC Strategic Plan reference in letter?  Proof read for spelling and grammar?  All pertinent attachments listed/labeled?  Costs identified/described in letter  Regulatory Note Required and Complete?  Formatted/Delivered in word-searchable doc format?  Potential Annexation Area (PAA) impacts identified?  Advertising required? if yes, cite all pertinent code/laws.  Any special circumstances affecting processing time?		Y   X   Y   X   X   X   X   X   X   X	NA		A
Advertising required? if yes, cite all pertinent code/laws.			NA ⊠ LW	Y N	A DM

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