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Legislative Review Form

donation
from
target



King County

2015-114

Agency: Public Health Contact person Eben Sutton Phone 263-8609

Ordinance Motion Proviso Report Other

Civil Division Prosecuting Attorney Review

Name Amy Eiden Version final Date 1-22-2015

Dept. Director or Designee Review

Name Eben Sutton, Chief Financial Officer Version final Date 1-22-2015

Performance Strategy & Budget Office Review

Name Kapena Pflum Version final Date

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

Name Bruce Ritzen Version final Date 1-22-2015

Executive Office Review & Transmittal Approval

Name Michelle Allison Version final Date

RECEIVED
2015 MAR -5 PM 3:48
KING COUNTY CLERK
COUNCIL

ENTRANCE CRITERIA REVIEW

EXEC OFFICE (initials) KCC CLERK

	Y	NA	Y	Y	NA	No
Fiscal note?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
KC Strategic Plan reference in letter?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Proof read for spelling and grammar?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
All pertinent attachments listed/labeled?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Costs identified/described in letter	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	No
Regulatory Note Required and Complete?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	No
Formatted/Delivered in word-searchable doc format?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Potential Annexation Area (PAA) impacts identified?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	No
Advertising required? if yes, cite all pertinent code/laws.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	No
Any special circumstances affecting processing time?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	No

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