

LG
LJ
Cindy
Hawacher



Legislative Review Form 2019-147

Zero youth
Detention Report

King County

Agency: Public Health Contact person Michael Gedeon Phone 263-9698

Ordinance Motion Proviso Report Other

Civil Division Prosecuting Attorney Review

Name: Monique Cohen Version Final Date 3/21/2019

Dept. Director or Designee Review

Name Michael Gedeon Version: Final Date 3/25/2019

Performance Strategy & Budget Office Review

Name Kapena Pflum Version Final Date 3/27/19

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

Name Bruce Ritzen Version Final Date 3/25/2019

Executive Office Review & Transmittal Approval

Name Kelli Carroll Version Final Date 3/25/2019

RECEIVED
2019 MAR 29 PM 3:12
KING COUNTY CLERK
KING COUNTY COUNCIL

ENTRANCE CRITERIA REVIEW

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