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State of Washington
ANNEXATION CERTIFICATE

Office of Financial Management, Forecasting Division, General Administration Building, PO Box 43113, Olympia, WA 98504-3113

IMPORTANT: The following documents must be attached with this certificate (RCW 35.13.260 and 35A.14.700):

1. **Three copies of the final ordinance** containing the legal description of the annexed area;
2. **Three copies of a map clearly showing annexed area and existing city limits** on an 8½"x11" or an 8½"x14" size paper. Outline the annexation boundaries in **red**; outline *former* city limits in **green**. Maps should conform to acceptable engineering standards, including directional arrow, scale, street designations, rivers, and other relevant physical characteristics; and,
3. **The original, handwritten Special Population Census Sheets** used to enumerate the population and housing of the annexed area and all census summary sheets. Census procedures and definitions must follow the Office of Financial Management's (OFM) Enumerator's Manual. Duplicate copies of the census are not needed. Please contact OFM for census manuals and forms at (360) 902-0597 or (360) 902-0599 or www.ofm.wa.gov.

City/Town RENTON *County* KING

Name of the Annexation (if any) TRACE MATTHEW

Original Ordinance Number	5722	*Amending Ordinance Number (if applicable)*	
Date Passed	9/15/2014	*Date Passed*	
Date Published	9/19/2014	*Date Published*	
Ordinance Effective Date	9/24/2014	*Ordinance Effective Date*	
Annexation Effective Date	9/24/2014	*Annexation Effective Date*	

Statute(s) Authorizing Annexation: RCW 35A 14.120 - 35A. 14.150

Was a boundary or Annexation Review Hearing Required? *Yes* ____ *No* X *If yes, date of hearing* ____

Annexation Area (in acres) 4.54

Population and Housing Census:

Housing Units	1
Occupied Housing Units	1
Population	1

CERTIFICATION: ***I hereby certify that, to effect the above annexation, all legal requirements have been satisfied, and that the data set forth in this certificate, including the attached documents, are true and correct.***

[CITY SEAL] *(Mayor)* Denis Law *Date* 11/20/14

Attest: (City/Town Clerk) *Date* 11/20/14

OFFICE OF FINANCIAL MANAGEMENT RECORD

The requirements of RCW 35.13.260 or 35A.14.700 have been met. I recognize this annexation as a part of the city for the purpose of developing official population estimates (RCW 43.62.020). This certification is for the limited purpose referenced above.

Date Received 11/26/14
Date Approved 12/3/14
State Certifying Official ____ *OFM File Number* 2014-086

(White) Office of Financial Management
(Canary) Department of Transportation
(Pink) Return to City/Town

No Carbon Paper Needed
Do Not Separate Form
Return All Three Copies