





Do not Separate Form

Return all Three Copies

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

ANNEXATION AND MUNICIPAL BOUNDARY CHANGE CERTIFICATE

For all Annexations and Boundary Line Adjustments - Including Street Right-of-Way Adjustments

IMPORTANT: The following documents must be attached with this certificate (RCW 35.13.260, 35A.14.700, 43.62.040):

Three copies of the final ordinance containing the legal description of the boundary change area;

(Canary)

(Pink)

Department of Transportation

Return to City/Town

- Three copies of a map clearly showing the boundary change area and existing city limits on an 81/2"x11" or 81/2"x14" size paper. Outline the boundary changes in red; outline former city limits in green. Maps should conform to acceptable engineering standards (i.e., directional arrow, scale, street names, rivers, and other physical characteristics). The Office of Financial Management (OFM) may be able to help with maps;
- The original Field Enumeration sheets used to enumerate the population and housing of the boundary change area and all summary tabulation sheets. Copies are not needed. Census procedures and definitions must follow OFM's Enumerator's Manual. Please contact OFM at (360) 902-0597 or (360) 902-0599 or see http://www.ofm.wa.gov/pop/annex/default.asp for census manuals and forms; and,
- If this is a mutual boundary change between governments, include a copy of the other government's (city/town or county) agreement to the change. If this is a boundary change between municipal governments, each municipality needs to submit this certificate to OFM with supporting documentation.

74 -			1.7	
City/Town AS(County _	FRANKLIN	
Name of the Annexation (if any)	BARKER	ANNE	XATION	
Original Ordinance Number	4330	Amend	ing Ordinance Number (if applicable) _	
Date Passed	1/3/17 *		Date Passed	
Date Published	1/9/2017		Date Published	
Ordinance Effective Date	FEB 1, 201	7:	Ordinance Effective Date	
Boundary Change Effective Date	FEB 1, 2017	1	Boundary Change Effective Date	
Authorizing Statute(s) RCW	35A.14		8	
Was a Boundary Review Board he	earing required? Yes	No 📉	If yes, date of hearing	
Has this annexation been filed wit	h the county? Yes 🏻	No 🗆	Date filed with county	1/10/2017
Has the city/town attorney reviewed the legal requirements associated with this annexation? Yes No				
Annexation Area (in acres)	119.29		Census: Housing Units	1
			Occupied Housing Units	*0
			Population	10'
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.				
	Mayor	MA	Date Date	1/23/12
[CITY SEAL]	Attest: City/Town Clerk	and	henworky Date	1/23/17
	OFFICE OF FINAN	CIAL MAI	NAGEMENT ONLY	
The requirements of RCW 35.13.260 or 35A.14.700 and 43.62.040 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 1/3 Date Approved 2/1/ OFM File Number 2017	2017
State Certifying Official	mar	_	Provisional Approval Yes Date Provisional Status Cleared	
(White) Office of Financial Manage	ment			No Carbon Paper Needed