



State of Washington ANNEXATION CERTIFICATE

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OFM FORECASTING

Office of Financial Management, Forecasting Division, General Administration Building, PO Box 43113, Olympia, WA 98504-0113

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 Pullman County Whitman

Name of the Annexation (if any) Bishop/Crithfield Annexation

Original Ordinance Number 17-9 Amending Ordinance Number (if applicable) N/A

Date Passed 08/01/17 Date Passed N/A

Date Published 08/05/17 Date Published N/A

Ordinance Effective Date 08/10/17 Ordinance Effective Date N/A

Annexation Effective Date 08/10/17 Annexation Effective Date N/A

Authorizing Statute(s) RCW 35A.14.420

Was a Boundary Review Board Hearing Required? Yes ☐ No ☒ If yes, date of hearing N/A

Has this annexation been filed with the county? Yes ☒ No ☐ Date filed with county 08/03/17

Has the County Assessor approved this annexation for the purpose of changing tax boundaries? Yes ☒ No ☐

Annexation Area (in acres) 9.0 Census: Housing Units 0

Occupied Housing Units 0

Population 0

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) [Signature] Date 9/8/17

Attest: (City/Town Clerk) [Signature] Date 9/8/17

OFFICE OF FINANCIAL MANAGEMENT ONLY

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 9/11/2017

Date Approved 9/21/2017

OFM File Number 2017-46

State Certifying Official [Signature] Provisional Approval Yes ☐

Date Provisional Status Cleared _____

(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