



KITTITAS COUNTY PERSONNEL ACTION FORM (PAF)

SECTION 1: EMPLOYEE DATA			
LAST NAME Kladnik	FIRST NAME Grace	EMPLOYEE # K8443	EFFECTIVE DATE 8/23/10 8/31/10

SECTION 2: TYPE OF ACTION			
EMPLOYEE TYPE	EMPLOYEE ACTION	TYPE OF SEPARATION	REASON FOR SEPARATION
<input type="checkbox"/> FULL-TIME (1) <input type="checkbox"/> PART-TIME (2) <input type="checkbox"/> LIMITED PART-TIME (3) <input checked="" type="checkbox"/> TEMPORARY (4) <input type="checkbox"/> CASUAL (5) <input type="checkbox"/> SEASONAL (6) <input type="checkbox"/> PROJECT (7) <input type="checkbox"/> WORK STUDY (8) <input type="checkbox"/> VOLUNTEER (9)	<input checked="" type="checkbox"/> NEW HIRE <input type="checkbox"/> RE-HIRE <input type="checkbox"/> MERIT / STEP <input type="checkbox"/> POSITION CHANGE (Describe Below) <input type="checkbox"/> BUDGET CHANGE (Describe Below) <input type="checkbox"/> LEAVE (List Type Below) <input type="checkbox"/> TERMINATION (Provide Separation Info) <input type="checkbox"/> OTHER (Describe Below)	<input type="checkbox"/> DISCHARGE (D) <input type="checkbox"/> RESIGNATION (Q) <input type="checkbox"/> RETIRED (R) <input type="checkbox"/> LAID OFF (L) <input type="checkbox"/> FAIL PROBATION (P) <input type="checkbox"/> OTHER (O)	<input type="checkbox"/> PERFORMANCE (P) <input type="checkbox"/> ATTENDANCE (A) <input type="checkbox"/> CONDUCT (C) <input type="checkbox"/> OTHER EMPLOYMENT (E) <input type="checkbox"/> PERSONAL (L) <input type="checkbox"/> OTHER (O)
		<input type="checkbox"/> Eligible For Rehire <input type="checkbox"/> Ineligible For Rehire	
Provide Details of Separation Below			

COMMENTS (include work schedule if position is less than full-time): Employee will be assigned to Parking. Employment will terminate at the conclusion of the 2010 Kittitas County Fair.

Will be compensated at \$.25/hour above wages listed if employee has attended and completed all assigned shifts.

SECTION 3: POSITION DATA			
Enter existing data from payroll system		Enter new data to be input into payroll system	
JOB TITLE	Fair Worker		
OCCUPATION CODE	3828		
UNION CODE	84		
PAY GRADE	328		
STEP / POSITION	3		
FLSA STATUS	<input type="checkbox"/> Non-Exempt <input type="checkbox"/> Exempt <input checked="" type="checkbox"/> Not Covered		
DRS STATUS	<input checked="" type="checkbox"/> Ineligible <input type="checkbox"/> PERS <input type="checkbox"/> LEOFF <input type="checkbox"/> PSERS		
HIRE DATE	8/23/10 8/31/10		
ADJ HIRE DATE	8/23/10 8/23/10 8/31/10		
POSITION DATE	8/23/10 8/31/10		
LAST RAISE DATE			
BASE WAGE	\$9		\$
LONGEVITY	\$		\$
FTE	<input checked="" type="checkbox"/> 100% <input type="checkbox"/> 80% <input type="checkbox"/> 75% <input type="checkbox"/> 60% <input type="checkbox"/> 50%		
FTE WAGE (Calculate if FTE < 100%)	\$		\$
PAYMENT METHOD	<input checked="" type="checkbox"/> HOURLY <input type="checkbox"/> MONTHLY <input type="checkbox"/> DAILY		
DEPARTMENT	Fairgrounds		
BUDGET NUMBER	A. 0109 - 109251003 A. _____ % A. _____ % B. _____ B. _____ % B. _____ %		
WORKWEEK	<input checked="" type="checkbox"/> Standard <input type="checkbox"/> Alternate <input type="checkbox"/> 207(k) exception		
ALLOWANCE (Detail in Comments Section)	\$ 0		\$
STIPEND (Detail in Comments Section)	\$ 0		\$
OTHER (Detail in Comments Section)	\$ 0		\$

SECTION 4: SIGNATURES (MUST BE SIGNED IN BLUE INK)			
DEPARTMENT HEAD / ELECTED OFFICIAL	DATE	BUDGET/PAYROLL	DATE
<i>[Signature]</i>	8/31/10	<i>[Signature]</i>	7/3/10
HUMAN RESOURCE	DATE	COMMISSIONER #1	DATE
<i>[Signature]</i>	9.3.10		
COMMISSIONER #2	DATE	COMMISSIONER #3	DATE

RETURN FORM TO HUMAN RESOURCES FOR DISTRIBUTION



KITTITAS COUNTY PERSONNEL ACTION FORM (PAF)

SECTION 1: EMPLOYEE DATA

LAST NAME Connor <u>Bellah</u>	FIRST NAME Bellah <u>Connor</u> ^{"MAX"}	EMPLOYEE # B8401	EFFECTIVE DATE 8/23/10 <u>8/31/10</u>
--	--	---------------------	---

SECTION 2: TYPE OF ACTION

EMPLOYEE TYPE	EMPLOYEE ACTION	TYPE OF SEPARATION	REASON FOR SEPARATION
<input type="checkbox"/> FULL-TIME (1)	<input checked="" type="checkbox"/> NEW HIRE	<input type="checkbox"/> DISCHARGE (D)	<input type="checkbox"/> PERFORMANCE (P)
<input type="checkbox"/> PART-TIME (2)	<input type="checkbox"/> RE-HIRE	<input type="checkbox"/> RESIGNATION (Q)	<input type="checkbox"/> ATTENDANCE (A)
<input type="checkbox"/> LIMITED PART-TIME (3)	<input type="checkbox"/> MERIT / STEP	<input type="checkbox"/> RETIRED (R)	<input type="checkbox"/> CONDUCT (C)
<input checked="" type="checkbox"/> TEMPORARY (4)	<input type="checkbox"/> POSITION CHANGE (Describe Below)	<input type="checkbox"/> LAID OFF (L)	<input type="checkbox"/> OTHER EMPLOYMENT (E)
<input type="checkbox"/> CASUAL (5)	<input type="checkbox"/> BUDGET CHANGE (Describe Below)	<input type="checkbox"/> FAIL PROBATION (P)	<input type="checkbox"/> PERSONAL (L)
<input type="checkbox"/> SEASONAL (6)	<input type="checkbox"/> LEAVE (List Type Below)	<input type="checkbox"/> OTHER (O)	<input type="checkbox"/> OTHER (O)
<input type="checkbox"/> PROJECT (7)	<input type="checkbox"/> TERMINATION (Provide Separation Info)		
<input type="checkbox"/> WORK STUDY (8)	<input type="checkbox"/> OTHER (Describe Below)	<input type="checkbox"/> Eligible For Rehire	<input type="checkbox"/> Ineligible For Rehire
<input type="checkbox"/> VOLUNTEER (9)		Provide Details of Separation Below	


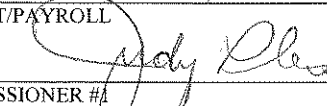
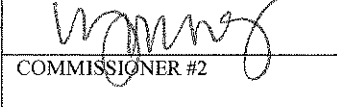
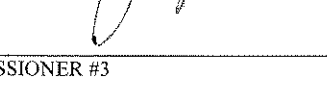
COMMENTS (include work schedule if position is less than full-time): Employee will be assigned to Parking. Employment will terminate at the conclusion of the 2010 Kittitas County Fair.

Will be compensated at \$.25/hour above wages listed if employee has attended and completed all assigned shifts.

SECTION 3: POSITION DATA

Enter existing data from payroll system		Enter new data to be input into payroll system
JOB TITLE	Fair Worker	
OCCUPATION CODE	3828	
UNION CODE	84	
PAY GRADE	328	
STEP / POSITION	3	
FLSA STATUS	<input type="checkbox"/> Non-Exempt <input type="checkbox"/> Exempt <input checked="" type="checkbox"/> Not Covered	<input type="checkbox"/> Non-Exempt <input type="checkbox"/> Exempt <input type="checkbox"/> Not Covered
DRS STATUS	<input checked="" type="checkbox"/> Ineligible <input type="checkbox"/> PERS <input type="checkbox"/> LEOFF <input type="checkbox"/> PSERS	<input type="checkbox"/> Ineligible <input type="checkbox"/> PERS <input type="checkbox"/> LEOFF <input type="checkbox"/> PSERS
HIRE DATE	8/23/10 8/31/10	
ADJ HIRE DATE	8/23/10 8/23/10 8/31/10	
POSITION DATE	8/23/10 8/23/10 8/31/10	
LAST RAISE DATE		
BASE WAGE	\$9	\$
LONGEVITY	\$	\$
FTE	<input checked="" type="checkbox"/> 100% <input type="checkbox"/> 80% <input type="checkbox"/> 75% <input type="checkbox"/> 60% <input type="checkbox"/> 50%	<input type="checkbox"/> 100% <input type="checkbox"/> 80% <input type="checkbox"/> 75% <input type="checkbox"/> 60% <input type="checkbox"/> 50%
FTE WAGE (Calculate if FTE < 100%)	\$	\$
PAYMENT METHOD	<input checked="" type="checkbox"/> HOURLY <input type="checkbox"/> MONTHLY <input type="checkbox"/> DAILY	<input type="checkbox"/> HOURLY <input type="checkbox"/> MONTHLY <input type="checkbox"/> DAILY
DEPARTMENT	Fairgrounds	
BUDGET NUMBER	A. 0109 - 109251003 A. _____ % B. _____ B. _____ %	A. _____ A. _____ % B. _____ B. _____ %
WORKWEEK	<input checked="" type="checkbox"/> Standard <input type="checkbox"/> Alternate <input type="checkbox"/> 207(k) exception	<input type="checkbox"/> Standard <input type="checkbox"/> Alternate <input type="checkbox"/> 207(k) exception
ALLOWANCE (Detail in Comments Section)	\$ 0	\$
STIPEND (Detail in Comments Section)	\$ 0	\$
OTHER (Detail in Comments Section)	\$ 0	\$

SECTION 4: SIGNATURES (MUST BE SIGNED IN BLUE INK)

DEPARTMENT HEAD / ELECTED OFFICIAL 	DATE 8/30/10	BUDGET/PAYROLL 	DATE 9/3/10
HUMAN RESOURCE 	DATE 9.3.10	COMMISSIONER #1 	DATE
COMMISSIONER #2	DATE	COMMISSIONER #3	DATE

RETURN FORM TO HUMAN RESOURCES FOR DISTRIBUTION



KITTITAS COUNTY PERSONNEL ACTION FORM (PAF)

SECTION 1: EMPLOYEE DATA

LAST NAME Raab	EMPLOYEE # William	EMPLOYEE # R8334	EFFECTIVE DATE 8/23/10 8/31/10
--------------------------	------------------------------	----------------------------	---

SECTION 2: TYPE OF ACTION

EMPLOYEE TYPE	EMPLOYEE ACTION	TYPE OF SEPARATION	REASON FOR SEPARATION
<input type="checkbox"/> FULL-TIME (1) <input type="checkbox"/> PART-TIME (2) <input type="checkbox"/> LIMITED PART-TIME (3) <input checked="" type="checkbox"/> TEMPORARY (4) <input type="checkbox"/> CASUAL (5) <input type="checkbox"/> SEASONAL (6) <input type="checkbox"/> PROJECT (7) <input type="checkbox"/> WORK STUDY (8) <input type="checkbox"/> VOLUNTEER (9)	<input checked="" type="checkbox"/> NEW HIRE <input type="checkbox"/> RE-HIRE <input type="checkbox"/> MERIT / STEP <input type="checkbox"/> POSITION CHANGE (Describe Below) <input type="checkbox"/> BUDGET CHANGE (Describe Below) <input type="checkbox"/> LEAVE (List Type Below) <input type="checkbox"/> TERMINATION (Provide Separation Info) <input type="checkbox"/> OTHER (Describe Below)	<input type="checkbox"/> DISCHARGE (D) <input type="checkbox"/> RESIGNATION (Q) <input type="checkbox"/> RETIRED (R) <input type="checkbox"/> LAID OFF (L) <input type="checkbox"/> FAIL PROBATION (P) <input type="checkbox"/> OTHER (O)	<input type="checkbox"/> PERFORMANCE (P) <input type="checkbox"/> ATTENDANCE (A) <input type="checkbox"/> CONDUCT (C) <input type="checkbox"/> OTHER EMPLOYMENT (E) <input type="checkbox"/> PERSONAL (L) <input type="checkbox"/> OTHER (O)
		<input type="checkbox"/> Eligible For Rehire <input type="checkbox"/> Ineligible For Rehire	
Provide Details of Separation Below			




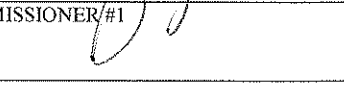
COMMENTS (include work schedule if position is less than full-time): Employee will be assigned to Security. Employment will terminate at the conclusion of the 2010 Kittitas County Fair.

Will be compensated at \$.25/hour above wages listed if employee has attended and completed all assigned shifts.

SECTION 3: POSITION DATA

Enter existing data from payroll system		Enter new data to be input into payroll system
JOB TITLE	Fair Worker	
OCCUPATION CODE	3828	
UNION CODE	84	
PAY GRADE	328	
STEP / POSITION	3	
FLSA STATUS	<input type="checkbox"/> Non-Exempt <input type="checkbox"/> Exempt <input checked="" type="checkbox"/> Not Covered	<input type="checkbox"/> Non-Exempt <input type="checkbox"/> Exempt <input type="checkbox"/> Not Covered
DRS STATUS	<input checked="" type="checkbox"/> Ineligible <input type="checkbox"/> PERS <input type="checkbox"/> LEOFF <input type="checkbox"/> PSERS	<input type="checkbox"/> Ineligible <input type="checkbox"/> PERS <input type="checkbox"/> LEOFF <input type="checkbox"/> PSERS
HIRE DATE	8/23/10 8/31/10	
ADJ HIRE DATE	8/23/10 8/31/10	
POSITION DATE	8/23/10 8/31/10	
LAST RAISE DATE		
BASE WAGE	\$9	\$
LONGEVITY	\$	\$
FTE	<input checked="" type="checkbox"/> 100% <input type="checkbox"/> 80% <input type="checkbox"/> 75% <input type="checkbox"/> 60% <input type="checkbox"/> 50%	<input type="checkbox"/> 100% <input type="checkbox"/> 80% <input type="checkbox"/> 75% <input type="checkbox"/> 60% <input type="checkbox"/> 50%
FTE WAGE (Calculate if FTE < 100%)	\$	\$
PAYMENT METHOD	<input checked="" type="checkbox"/> HOURLY <input type="checkbox"/> MONTHLY <input type="checkbox"/> DAILY	<input type="checkbox"/> HOURLY <input type="checkbox"/> MONTHLY <input type="checkbox"/> DAILY
DEPARTMENT	Fairgrounds	
BUDGET NUMBER	A. <u>0109 - 109251003</u> A. _____ % B. _____ B. _____ %	A. _____ A. _____ % B. _____ B. _____ %
WORKWEEK	<input checked="" type="checkbox"/> Standard <input type="checkbox"/> Alternate <input type="checkbox"/> 207(k) exception	<input type="checkbox"/> Standard <input type="checkbox"/> Alternate <input type="checkbox"/> 207(k) exception
ALLOWANCE (Detail in Comments Section)	\$	\$
STIPEND (Detail in Comments Section)	\$	\$
OTHER (Detail in Comments Section)	\$	\$

SECTION 4: SIGNATURES (MUST BE SIGNED IN BLUE INK)

DEPARTMENT HEAD / ELECTED OFFICIAL 	DATE 8/30/10	BUDGET/PAYROLL 	DATE 9/3/10
HUMAN RESOURCE 	DATE 9.3.10	COMMISSIONER #1 	DATE
COMMISSIONER #2	DATE	COMMISSIONER #3	DATE

RETURN FORM TO HUMAN RESOURCES FOR DISTRIBUTION

Updated: 08/27/07 FOR HR USE: PAF Log _____ NT Update _____ Eval Date _____ Eval Rating (IE - ID - S - AA - S) Initial _____