

Discussion and possible action to approve the payout comp-time for employee ID# 8741 who is transferring out to another County Office.

	Account Number	Acct. Name	Adopted	Requested	Current	End Balance
FROM:	1001-4070-001-443000-110	Repair Maint- Software	\$ 19,500.00	\$ 5,000.00	\$ 5,733.00	\$ 733.00
	1001-4070-001-460105	Minor Tools	\$ 15,000.00	\$ 5,148.07	\$ 36,118.28	\$ 30,970.21
		Total		\$ 10,148.07		
TO:	1001-4070-001-410000	Payroll Cost	\$ 8,555,660.00	\$ 8,322.87	\$ 449,012.69	\$ 457,335.56
	1001-4070-001-422000	FICA County Share	\$ 758,870.00	\$ 636.70	\$ 114,031.42	\$ 114,668.12
	1001-4070-001-423000	Retirement County Share	\$ 1,167,568.00	\$ 979.60	\$ 125,570.94	\$ 126,550.54
	1001-4070-001-426000	Workers Comp	\$ 173,598.00	\$ 145.65	\$ 17,569.31	\$ 17,714.96
	1001-4070-001-425000	Unemployment	\$ 75,391.00	\$ 63.25	\$ 27,078.73	\$ 27,141.98
		Total		\$ 10,148.07		

Issue: Line item transfer to cover payout for employee ID# 8741 who is transferring from a CBA to another county office.

Solution: Request a line item transfer

Result: With court approval, payout for employee will be cleared

Financial Impact

Budget Account Number: Various
 Funding Source: N/A
 Balance: Various
 Financial Impact: N/A
 Line Item Transfer: N/A



ORIGINAL

WEBB COUNTY - PERSONNEL WORKSHEET

Revised/Effective March 2018

EMPLOYEE ID 8741
FUND 4070
DEPT. NAME Webb County Sheriff's Office

Department Use Only

I. EMPLOYEE INFORMATION

Name: Jorge A. Medina, Title: Officer II, SOC SEC NO.: 450-47-0313, Grade/Step: CBA, Rate: \$21.95

II. PURPOSE

Check all that apply: [] NEW EMPLOYEE, [] RATE CHANGE, [] TERMINATED, [] END OF PROBATIONARY PERIOD, [] REHIRE, [] TRANSFER, [X] OTHER: Transfer

III. EMPLOYEE TYPE

[X] PERMANENT FULL TIME, [] PERMANENT PART TIME, [] TEMPORARY FULL TIME, [] TEMPORARY PART TIME, [] VOLUNTEER / RESERVE

NOTE: On Payouts - Employee's Attendance Record, Leave Forms and/ or Time Clock Plus Report MUST be attached (as "back-up").

FROM SLOT # 470, DEPT. TRANSFERRED FROM 4070, TO SLOT # 1255, A/L HRS ACCEPTED / TRANSFERRED, DEPT. TRANSFERRED TO, S/L HRS ACCEPTED / TRANSFERRED

PAYOUT: ANNUAL LEAVE-Code 106 HRS @ 470 RATE =, COMP/IT-Code 107 344.775 HRS @ \$24.14 RATE = \$8,322.87, TOTAL =

I CERTIFY THAT ALL DOCUMENTATION RELATIVE TO THIS PERSONNEL WORKSHEET IS CORRECT AND COMPLETE

M. Cuellar (Signature)

AUTHORIZED SIGNATURE Martin Cuellar, DEPARTMENT Webb County Sheriff's Office, DATE 9/25/2018

Reviewed by Auditors (Accrual Payouts) []

Date, Please Print Name, Date, Please Print Name

To Be Completed by Human Resources and Approved by Budget Office

I. PAYROLL DATA

BIWEEKLY SALARY, HOURLY RATE, Wage Plan (if applicable), OLD RATE =, NEW RATE =, EFFECTIVE DATE, CERTIFICATION DATE (if available)

II. VERIFY PURPOSE:

Pre-Employment Clearance Approved: Yes No

Approved by Budget Officer(s): Yes No

AUTHORIZED SIGNATURE, DATE, AUTHORIZED SIGNATURE, DATE

Title	Hourly Rate	Annual	FICA	RETIREMENT	W/C	UNEMPLOYMENT
		Gross	0.0765	0.1177	ANNUAL	0.0076
ID# 8741	\$ 24.14	\$ 8,322.87	\$ 636.70	\$ 979.60	\$ 145.65	\$ 63.25

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