



RESOLUTION NO.

OF THE BOARD OF SUPERVISORS OF THE COUNTY OF EL DORADO

WHEREAS, the Board of Supervisors wishes to establish a policy whereby elected officers of the County could individually submit irrevocable elections to decline any portion of base salary should they voluntarily choose to do so;

NOW, THEREFORE, BE IT RESOLVED, as follows:

1. At any time, an elected officer of the County, including the Sheriff, the District Attorney, the Recorder-Clerk, the Assessor, the Auditor-Controller, the Treasurer-Tax Collector and the Surveyor, may elect, by providing written notice to the County Auditor, to adjust that officer's individual salary to levels below those otherwise established. The written election shall specify the percentage by which the base salary is to be reduced. The written election shall also specify the time period for which it shall be effective. The time period shall commence no sooner than the next full pay period after the date of the written election. The written election shall become effective on the date specified in the written election and shall be binding upon the officer and the County until the expiration date stated in the written election. Unless a new election is made prior to the date of expiration, compensation paid to the officer after the expiration date shall be paid in accordance with all other ordinances or resolutions then in effect governing elected officers' compensation without regard to the prior election. The election shall be irrevocable during its term and is unconditional.

2. The County Auditor is authorized and directed to honor signed and completed waiver forms for elected officers for payroll processing and nothing herein shall be deemed a reduction in salary or service for purposes of the calculation of any retirement benefits or other job-related benefits.

PASSED AND ADOPTED by the Board of Supervisors of the County of El Dorado at a regular meeting of said Board, held the ____ day of _____, 20__, by the following vote of said Board:

Attest: Suzanne Allen de Sanchez
Clerk of the Board of Supervisors

Ayes:
Noes:
Absent:

By: _____
Deputy Clerk Chairman, Board of Supervisors

I CERTIFY THAT:
THE FOREGOING INSTRUMENT IS A CORRECT COPY OF THE ORIGINAL ON FILE IN THIS OFFICE.

Attest: Suzanne Allen de Sanchez, Clerk of the Board of Supervisors of the County of El Dorado, State of California.

By: _____ Date: _____
Deputy Clerk