

**Letter of Agreement  
Between the County of El Dorado  
and the  
El Dorado County Managers' Association  
Representing Employees in the Management Bargaining Unit**

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Whereas, the El Dorado County Managers' Association (Association) represents employees in the Management (MA) bargaining unit, and

Whereas, the County of El Dorado (County) and Association executed a Memorandum of Understanding (MOU) for the period of July 1, 2024 to December 31, 2026, and

Whereas, Article 10. Leaves, Section 4. Personal Leave, was first introduced upon adoption of the MOU, and

Whereas, based on the timing of MOU adoption, as written, employees existing in the MA unit the pay period in which the MOU was adopted would not receive this benefit until pay period 01-2026 (the pay period beginning December 13, 2025), while subsequent new hires have received a pro-rated benefit pursuant to the MOU, and

It is therefore agreed by the Parties that:

1. Effective the first full pay period following Board of Supervisors adoption of this Letter of Agreement (LOA) full-time regular and limited term employees who were in the MA bargaining unit during the pay period the July 1, 2024 – December 31, 2026, MOU was adopted by the Board (pay period 08-2025), and who have remained continuously in MA through the date this Letter of Agreement is adopted, shall receive a one-time credit of sixteen (16) hours of personal leave time the first full pay period following adoption of this LOA for use through pay period 26-2025. Part-time employees in the MA bargaining unit that satisfy the aforementioned criteria shall receive pro-rated personal leave hours proportionate to the employee's full-time equivalency.
2. This Agreement shall terminate on December 12, 2025. Unused personal leave hours granted pursuant to this LOA shall thereafter be lost and not subject to any payoff.
3. Except as explicitly set forth above, all other terms and conditions of the MOU, remain in full force and effect.

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FOR THE COUNTY

\_\_\_\_\_  
Joseph Carruesco  
Human Resources Director  
Or Designee

Date: \_\_\_\_\_

Board of Supervisors

\_\_\_\_\_  
Chair, Board of Supervisors

Date: \_\_\_\_\_

FOR THE ASSOCIATION

\_\_\_\_\_  
Jon Crawford  
Labor Representative  
Or Designee

Date: \_\_\_\_\_

ATTEST: Kim Dawson  
Clerk of the Board of Supervisor

\_\_\_\_\_  
By: Deputy Clerk

Date: \_\_\_\_\_