

RESOLUTION NO._____

RESOLUTION OF THE BOARD OF SUPERVISORS OF THE COUNTY OF EL DORADO AMENDING THE SALARY SCHEDULE OF EL DORADO COUNTY

WHEREAS, the Board of Supervisors in adopting the budget for FY 2007/2008 has approved positions in new classifications; and

WHEREAS, it is necessary for the Board of Supervisors to approve the job specifications for the revised classification, and to adopt the salary ranges and designate the bargaining unit for these classifications; and

WHEREAS, the County has advised the bargaining representatives of the proposed revised class specification, and proposed salary range and bargaining unit as set forth below.

BE IT RESOLVED AND ORDERED that the Board of Supervisors of El Dorado County adopt the class specification for the revised classification, and implement the designated bargaining unit as listed below and that this resolution shall, in accordance with Section 203 of the El Dorado County Compensation Administration Resolution #227-84 for represented employees, and Section 601 of the Salary and Benefits Resolution #323-2001, as amended, for unrepresented employees, establish the salary range for the classification to become effective the first full pay period following adoption of the Board of Supervisors; and;

NOW, THEREFORE, BE IT FURTHER RESOLVED AND ORDERED that the El Dorado County Board of Supervisors amends the El Dorado County Salary Schedule as follows:

Class#	Class Title	BU	Salary Range
8119	Disease Investigation and	PL	\$21.39 to \$26.00
	Control Specialist I		\$3707.60 to \$4506.66
8120	Disease Investigation and	PL	\$23.78 to \$28.91
	Control Specialist II		\$4121.86 to \$5011.06

PASSED AND ADOP	>TED by the Board of Supervisors of t	he County of El Dorado at a regular meeting of
said Board, held the _	day of	, 2007, by the following vote
of said Board:		

Attest:

Ayes:

Cindy Keck Clerk of the Board of Supervisors

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.

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DATE: _____

Attest: CINDY KECK, Clerk of the Board of Supervisors of the County of El Dorado, State of California.

Ву:_____

Deputy Clerk