

Report ID: SJHR800

SAN JOAQUIN COUNTY

Run Date: 09/12/2005

EPAD REPORT

Employee Name: Tiffany K Anderson EmplId: 146836 Empl Rcd: 0 Status: A Step Entry Date: 04/19/2004

Job Effective Date: 08/01/2005 CURRENT JOB 10/13/05 FUTURE JOB

Job Effective Seq: 0

Action: 0

Reason: PAY

Position Number: MER

Company: ENT Special Entities

Business Unit: SJ001 San Joaquin County

Department: 4999554000 SJ Co Mosquito Abatement

Location: 49990012 SJ Co Mosquito Abatement Dist

Supervisor: 100220 Adrian Van Houten

Reports to: 8900 Special District Class Code

Job Code: R Special Dist - Retirement Only

Regular/Temporary: F

Full/Part: DRO

Empl Class: N 80.00

Override Reason: 80.00

Standard Hours: 80.00

Contract Number: X Non-Assigned

Union Code: ENT

Salary Administration Plan: NGD

Grade: *

Step: 1,559.70

Biweekly Rate: 19.50

Hourly Rate: 04/19/2004

Hire Date: 04/19/2004

Probation Date: 04/19/2004

Explanation or Reason for Job Transaction (include Reposition Number and Passed Physical Date):

Step increase to D; completed one year

Current Supplemental Pay Supplemental Code Hourly Rate Begin Date End Date Status

effective pay day 11/4/05

Explanation or Reason for Supplemental Pay Transactions:

Appointing Department Signatures



Date 10-17-05

Employee Signature (if required)

Date

COPY

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Job Effective Seq: 0 PAY MER 10/13/05

Reason: Position Number: Company: Business Unit: Department: Location: Supervisor: Reports to: Job Code: Regular/Temporary: Full/Part: Empl Class: Override Reason: Standard Hours: Contract Number: Union Code: Salary Administration Plan: Grade: Step: Biweekly Rate: Hourly Rate: Hire Date: Probation Date: Explanation or Reason for Job Transaction (include Repusition Number and Passed Physical Date):

ENT Special Entities ENT Special District Class Code 8900 Special District Class Code F Special Dist - Retirement Only DRO N 80.00 X Non-Assigned ENT NGD * 1,559.70 19.50 04/19/2004 \$1,637.69 \$20,431

Supplemental Code Hourly Rate Begin Date End Date Status

Current Supplemental Pay Supplemental Code Hourly Rate Begin Date End Date Status

Explanation or Reason for Supplemental Pay Transactions:

Appointing Department Signatures Date 10-17-05

Employee Signature (if required) Date

COPY