

Judicial Council of California

Schedule 7A

Certification

2021-22

Court: Superior Court - Humboldt

CERTIFICATION

I HEREBY CERTIFY, to the best of my knowledge and belief, that the information stated in the Schedule 7A fairly presents the salary, benefits, and FTE of each authorized position, as of July 1, 2020, in accordance with the reporting requirements adopted by the Judicial Council pursuant to authority granted by Government Code section 77206.



Signature of Presiding Judge or Executive Officer

Judicial Council of California

Trial Court Funding Act of 1997
SCHEDULE 7A
Salary and Position Worksheet
Transmittal and Submission
2021-22

Court System: Superior Court - Humboldt
County Number
(for JCC staff
use): 12

The Court Budget Unit of the Judicial Council Budget Services office will perform a general overall compliance review of the attached Schedule 7A from your court. The Schedule 7A will then be processed by macros that will compute the total salary and benefits for each position based upon the salary and benefit information contained within the attached spreadsheets. The macros will compute and sort the salary and benefits by Program, Element, Component, and Task (PECT). This information will be downloaded into a database and uploaded into a Budget Upload Template for your court.

In the event that questions arise regarding the information listed on your court's Schedule 7A, please provide the court contact information requested below.

For General Questions: [Regarding Schedule 7A]

Court Contact: Shannon Walker
Contact's Phone: (707) 269-1205
E-mail Address: shannonw@humboldtcourt.ca.gov

For Specific Questions: [Regarding Positions, Salary or PECT Numbers]

Schedule 7A Prepared By: Shannon Walker
Preparer's Phone: (707) 269-1205
E-mail Address: shannonw@humboldtcourt.ca.gov

Schedule 7A

2019-20

Superior Court - Humboldt

Comments Worksheet	
Schedule 7A Worksheet	
	Example: Types of differential pay (e.g., locality, bilingual, etc.) included in annual salaries.
1	
2	
3	
4	
Benefits Worksheets	
	Example: Retirement contributions include pension obligation bonds or certificates of participation.
1	
2	
3	
4	
Base Salary Adjustment Worksheet	
	Example: Dates of negotiated salary increases and salary increases that will come into effect after July 1, 2019.
1	
2	
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General comments	
1	
2	
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Schedule 7A 2021-22

Superior Court - Humboldt

Summary of Salary & Benefit Budgets for All Authorized Positions	2021-22
Salary	\$ 4,825,368.07
OASDI & Medicare	\$ 364,705.21
Retirement	\$ 1,365,459.43
Deferred Compensation	\$ -
Workers' Compensation	\$ 74,521.84
Health Insurance	\$ 963,675.78
Other Insurance	\$ 4,543.34
Other Benefits (Salary Driven and Non Salary Driven)	\$ 41,289.25
Total Salary and Benefit Budget	\$ 7,639,562.92

Schedule 7A: Salary and Position Worksheet
2021-22

Superior Court - Humboldt

Superior Court - Humboldt

12

A	B	C	E	F	G	H	I	J	K	L	M	N	O	P	Q
Position Classification	Model Class #	Manager, Supervisor or Other	Employee Org. Row #	Facility Code Row #	Position Status - Filled (1) or Vacant (0)	Retirement Plan Code Row #	Position (FTE)	Annual Salary	Beginning Step (Monthly)	Last Step (Monthly)	Fund	Cost Center	WBS Element	Functional Area (PECT)	Total Salary (Col. I x J)
Operations Supervisor	2028	Supervisor	17	1	1	1	1.00	\$ 95,267	\$ 5,356	\$ 8,382	110001	128000		1310	95,267
Operations Supervisor	2028	Supervisor	17	1	1	1	1.00	\$ 79,017	\$ 5,353	\$ 8,377	110001	128000		1310	79,017
Operations Supervisor	2028	Supervisor	17	1	1	3	1.00	\$ 70,879	\$ 4,624	\$ 7,237	110001	128000		1310	70,879
Operations Supervisor	2028	Supervisor	17	1	1	1	1.00	\$ 68,115	\$ 5,098	\$ 7,978	110001	128000		1310	68,115
Paralegal	2011a	Other	1	1	1	1	0.18	\$ 54,401	\$ 3,881	\$ 4,717	190100	126000	G-121058-1-21	1220	9,792
Paralegal	2011a	Other	1	1	1	1	0.82	\$ 54,401	\$ 3,881	\$ 4,717	110001	127000	M-1212-121	1220	44,609
Reporter	2006a	Other	49	1	0	3	1.00	\$ 66,576	\$ 5,032	\$ 6,117	110001	123000		1100	66,576
Reporter	2006a	Other	50	1	1	2	0.94	\$ 73,401	\$ 5,032	\$ 6,117	110001	123000		1100	68,997
Reporter	2006a	Other	51	1	1	1	0.75	\$ 69,522	\$ 5,032	\$ 6,117	110001	123000		1100	52,141
Reporter	2006a	Other	50	1	1	1	0.75	\$ 86,437	\$ 5,926	\$ 7,203	110001	123000		1100	64,827
Reporter	2006a	Other	50	1	1	1	1.00	\$ 84,969	\$ 5,826	\$ 7,081	110001	123000		1100	84,969
Reporter	2006a	Other	49	1	1	2	1.00	\$ 77,071	\$ 5,284	\$ 6,423	110001	123000		1100	77,071
Reporter	2006a	Other	51	1	1	1	0.75	\$ 77,071	\$ 5,284	\$ 6,423	110001	123000		1100	57,803
Reporter	2006a	Other	50	1	1	2	1.00	\$ 80,007	\$ 5,485	\$ 6,667	110001	123000		1100	80,007
Reporter	2006a	Other	51	1	1	1	0.50	\$ 84,969	\$ 5,826	\$ 7,081	110001	123000		1100	42,484
Reporter	2006a	Other	51	1	1	1	0.75	\$ 84,969	\$ 5,826	\$ 7,081	110001	123000		1100	63,726
Reporter	2006a	Other	50	1	1	2	0.06	\$ 73,401	\$ 5,032	\$ 6,117	190100	126000	G-121059-1-21	1100	4,404
Research Attorney	2010a	Other	22	1	1	3	1.00	\$ 100,241	\$ 6,833	\$ 9,567	110001	123000		1100	100,241
Senior Judicial Secretary	5007b	Other	19	1	1	1	1.00	\$ 57,699	\$ 3,955	\$ 4,808	110001	123000		1100	57,699
Technology Specialist	4003	Supervisor	17	1	1	3	1.00	\$ 92,578	\$ 6,011	\$ 8,785	110001	125000		9500	92,578
Totals ----->							82.90								\$ 4,825,368

**Non-Salary-Driven Benefits
FY 2018-19**

Superior Court - Humboldt

Note: Replace "Enter Title" with the benefit title.

Non-Salary Driven Benefits Table																							
				Health Insurance						WC	Other Insurance					Deferred Compensation	Other Benefits						
A	B	C	D	E	F	G	H	I	J	K	L	M	N	O	P	Q	R	S	T	U	V	W	
Employee Org. Row #	Employee Organizational Unit Name	Bargaining Unit Name	Union Name	Medical	Dental	Vision	Flexible Benefits	Combined Health	Total Health Insurance	Workers' Comp	Disability Insurance (SDI)	Unemployment Insurance	Life Insurance	Long-Term Disability	Other Insurance	Deferred Compensation	Benefit Allowance	E.A.P. Prog.	Enter Title	Enter Title	Enter Title	Enter Title	
1	Represented Staff (Emp. Only)	AFSCME - Council 57 - Main Unit	A.F.S.C.M.E.	\$ 9,744	\$ 540	\$ 98	\$ -	\$ -	\$ 10,382	\$ 921	\$ -	\$ -	\$ 56	\$ -	\$ -	\$ -	\$ -	\$ 34	\$ -	\$ -	\$ -	\$ -	
2	Represented Staff (Emp. + 1 Dep.)	AFSCME - Council 57 - Main Unit	A.F.S.C.M.E.	\$ 13,656	\$ 540	\$ 98	\$ -	\$ -	\$ 14,294	\$ 921	\$ -	\$ -	\$ 56	\$ -	\$ -	\$ -	\$ -	\$ 34	\$ -	\$ -	\$ -	\$ -	
3	Represented Staff (Emp. + >1 Dep.)	AFSCME - Council 57 - Main Unit	A.F.S.C.M.E.	\$ 16,836	\$ 540	\$ 98	\$ -	\$ -	\$ 17,474	\$ 921	\$ -	\$ -	\$ 56	\$ -	\$ -	\$ -	\$ -	\$ 34	\$ -	\$ -	\$ -	\$ -	
4	Represented Staff (Declined Med.Ins.)	AFSCME - Council 57 - Main Unit	A.F.S.C.M.E.	\$ 2,520	\$ 540	\$ 98	\$ -	\$ -	\$ 3,158	\$ 921	\$ -	\$ -	\$ 56	\$ -	\$ -	\$ -	\$ -	\$ 34	\$ -	\$ -	\$ -	\$ -	
5	Represented Staff (Emp. Only) (Declined Vision)	AFSCME - Council 57 - Main Unit	A.F.S.C.M.E.	\$ 9,744	\$ 540	\$ -	\$ -	\$ -	\$ 10,284	\$ 921	\$ -	\$ -	\$ 56	\$ -	\$ -	\$ -	\$ -	\$ 34	\$ -	\$ -	\$ -	\$ -	
6	Represented Staff (Emp. + 1) (Declined Vision)	AFSCME - Council 57 - Main Unit	A.F.S.C.M.E.	\$ 13,656	\$ 540	\$ -	\$ -	\$ -	\$ 14,196	\$ 921	\$ -	\$ -	\$ 56	\$ -	\$ -	\$ -	\$ -	\$ 34	\$ -	\$ -	\$ -	\$ -	
7	Represented Staff (Emp. + >1) (Declined Vision)	AFSCME - Council 57 - Main Unit	A.F.S.C.M.E.	\$ 16,836	\$ 540	\$ -	\$ -	\$ -	\$ 17,376	\$ 921	\$ -	\$ -	\$ 56	\$ -	\$ -	\$ -	\$ -	\$ 34	\$ -	\$ -	\$ -	\$ -	
8	Represented Staff (Declined Medical) (Declined Vision)	AFSCME - Council 57 - Main Unit	A.F.S.C.M.E.	\$ 2,520	\$ 540	\$ -	\$ -	\$ -	\$ 3,060	\$ 921	\$ -	\$ -	\$ 56	\$ -	\$ -	\$ -	\$ -	\$ 34	\$ -	\$ -	\$ -	\$ -	
9	Represented Staff (Emp. Only) (Declined Dental)	AFSCME - Council 57 - Main Unit	A.F.S.C.M.E.	\$ 9,744	\$ -	\$ 98	\$ -	\$ -	\$ 9,842	\$ 921	\$ -	\$ -	\$ 56	\$ -	\$ -	\$ -	\$ -	\$ 34	\$ -	\$ -	\$ -	\$ -	
10	Represented Staff (Emp. + 1) (Declined Dental)	AFSCME - Council 57 - Main Unit	A.F.S.C.M.E.	\$ 13,656	\$ -	\$ 98	\$ -	\$ -	\$ 13,754	\$ 921	\$ -	\$ -	\$ 56	\$ -	\$ -	\$ -	\$ -	\$ 34	\$ -	\$ -	\$ -	\$ -	
11	Represented Staff (Emp. + >1) (Declined Dental)	AFSCME - Council 57 - Main Unit	A.F.S.C.M.E.	\$ 16,836	\$ -	\$ 98	\$ -	\$ -	\$ 16,934	\$ 921	\$ -	\$ -	\$ 56	\$ -	\$ -	\$ -	\$ -	\$ 34	\$ -	\$ -	\$ -	\$ -	
12	Represented Staff (Declined Medical) (Declined Dental)	AFSCME - Council 57 - Main Unit	A.F.S.C.M.E.	\$ 2,520	\$ -	\$ 98	\$ -	\$ -	\$ 2,618	\$ 921	\$ -	\$ -	\$ 56	\$ -	\$ -	\$ -	\$ -	\$ 34	\$ -	\$ -	\$ -	\$ -	
13	Represented Staff (Emp. Only) (Declined Vision) (Declined Dental)	AFSCME - Council 57 - Main Unit	A.F.S.C.M.E.	\$ 9,744	\$ -	\$ -	\$ -	\$ -	\$ 9,744	\$ 921	\$ -	\$ -	\$ 56	\$ -	\$ -	\$ -	\$ -	\$ 34	\$ -	\$ -	\$ -	\$ -	
14	Represented Staff (Emp. + 1) (Declined Vision) (Declined Dental)	AFSCME - Council 57 - Main Unit	A.F.S.C.M.E.	\$ 13,656	\$ -	\$ -	\$ -	\$ -	\$ 13,656	\$ 921	\$ -	\$ -	\$ 56	\$ -	\$ -	\$ -	\$ -	\$ 34	\$ -	\$ -	\$ -	\$ -	
15	Represented Staff (Emp. + >1) (Declined Vision) (Declined Dental)	AFSCME - Council 57 - Main Unit	A.F.S.C.M.E.	\$ 16,836	\$ -	\$ -	\$ -	\$ -	\$ 16,836	\$ 921	\$ -	\$ -	\$ 56	\$ -	\$ -	\$ -	\$ -	\$ 34	\$ -	\$ -	\$ -	\$ -	
16	Represented Staff (Declined Medical) (Declined Vision) (Declined Dental)	AFSCME - Council 57 - Main Unit	A.F.S.C.M.E.	\$ 2,520	\$ -	\$ -	\$ -	\$ -	\$ 2,520	\$ 921	\$ -	\$ -	\$ 56	\$ -	\$ -	\$ -	\$ -	\$ 34	\$ -	\$ -	\$ -	\$ -	
17	M/C/P (Emp. Only)			\$ 9,744	\$ 540	\$ 98	\$ -	\$ -	\$ 10,382	\$ 921	\$ -	\$ -	\$ 56	\$ -	\$ -	\$ -	\$ -	\$ 34	\$ -	\$ -	\$ -	\$ -	
18	M/C/P Staff (Emp. + 1 Dep.)			\$ 13,656	\$ 540	\$ 98	\$ -	\$ -	\$ 14,294	\$ 921	\$ -	\$ -	\$ 56	\$ -	\$ -	\$ -	\$ -	\$ 34	\$ -	\$ -	\$ -	\$ -	
19	M/C/P Staff (Emp. + >1 Dep.)			\$ 16,836	\$ 540	\$ 98	\$ -	\$ -	\$ 17,474	\$ 921	\$ -	\$ -	\$ 56	\$ -	\$ -	\$ -	\$ -	\$ 34	\$ -	\$ -	\$ -	\$ -	
20	M/C/P Staff (Declined Med.Ins.)			\$ 2,520	\$ 540	\$ 98	\$ -	\$ -	\$ 3,158	\$ 921	\$ -	\$ -	\$ 56	\$ -	\$ -	\$ -	\$ -	\$ 34	\$ -	\$ -	\$ -	\$ -	
21	M/C/P (Emp. Only) (Declined Vision)			\$ 9,744	\$ 540	\$ -	\$ -	\$ -	\$ 10,284	\$ 921	\$ -	\$ -	\$ 56	\$ -	\$ -	\$ -	\$ -	\$ 34	\$ -	\$ -	\$ -	\$ -	
22	M/C/P (Emp. + 1) (Declined Vision)			\$ 13,656	\$ 540	\$ -	\$ -	\$ -	\$ 14,196	\$ 921	\$ -	\$ -	\$ 56	\$ -	\$ -	\$ -	\$ -	\$ 34	\$ -	\$ -	\$ -	\$ -	
23	M/C/P (Emp. + >1) (Declined Vision)			\$ 16,836	\$ 540	\$ -	\$ -	\$ -	\$ 17,376	\$ 921	\$ -	\$ -	\$ 56	\$ -	\$ -	\$ -	\$ -	\$ 34	\$ -	\$ -	\$ -	\$ -	
24	M/C/P (Declined Medical) (Declined Vision)			\$ 2,520	\$ 540	\$ -	\$ -	\$ -	\$ 3,060	\$ 921	\$ -	\$ -	\$ 56	\$ -	\$ -	\$ -	\$ -	\$ 34	\$ -	\$ -	\$ -	\$ -	
25	M/C/P (Emp. Only) (Declined Dental)			\$ 9,744	\$ -	\$ 98	\$ -	\$ -	\$ 9,842	\$ 921	\$ -	\$ -	\$ 56	\$ -	\$ -	\$ -	\$ -	\$ 34	\$ -	\$ -	\$ -	\$ -	
26	M/C/P (Emp. + 1) (Declined Dental)			\$ 13,656	\$ -	\$ 98	\$ -	\$ -	\$ 13,754	\$ 921	\$ -	\$ -	\$ 56	\$ -	\$ -	\$ -	\$ -	\$ 34	\$ -	\$ -	\$ -	\$ -	
27	M/C/P (Emp. + >1) (Declined Dental)			\$ 16,836	\$ -	\$ 98	\$ -	\$ -	\$ 16,934	\$ 921	\$ -	\$ -	\$ 56	\$ -	\$ -	\$ -	\$ -	\$ 34	\$ -	\$ -	\$ -	\$ -	
28	M/C/P (Declined Medical) (Declined Dental)			\$ 2,520	\$ -	\$ 98	\$ -	\$ -	\$ 2,618	\$ 921	\$ -	\$ -	\$ 56	\$ -	\$ -	\$ -	\$ -	\$ 34	\$ -	\$ -	\$ -	\$ -	
29	M/C/P (Emp. Only) (Declined Vision) (Declined Dental)			\$ 9,744	\$ -	\$ -	\$ -	\$ -	\$ 9,744	\$ 921	\$ -	\$ -	\$ 56	\$ -	\$ -	\$ -	\$ -	\$ 34	\$ -	\$ -	\$ -	\$ -	
30	M/C/P (Emp. + 1) (Declined Vision) (Declined Dental)			\$ 13,656	\$ -	\$ -	\$ -	\$ -	\$ 13,656	\$ 921	\$ -	\$ -	\$ 56	\$ -	\$ -	\$ -	\$ -	\$ 34	\$ -	\$ -	\$ -	\$ -	
31	M/C/P (Emp. + >1) (Declined Vision) (Declined Dental)			\$ 16,836	\$ -	\$ -	\$ -	\$ -	\$ 16,836	\$ 921	\$ -	\$ -	\$ 56	\$ -	\$ -	\$ -	\$ -	\$ 34	\$ -	\$ -	\$ -	\$ -	
32	M/C/P (Declined Medical) (Declined Vision) (Declined Dental)			\$ 2,520	\$ -	\$ -	\$ -	\$ -	\$ 2,520	\$ 921	\$ -	\$ -	\$ 56	\$ -	\$ -	\$ -	\$ -	\$ 34	\$ -	\$ -	\$ -	\$ -	
33	SJO (Emp. Only)			\$ 9,744	\$ 540	\$ 98	\$ -	\$ -	\$ 10,382	\$ 921	\$ -	\$ -	\$ 56	\$ -	\$ -	\$ -	\$ -	\$ 34	\$ -	\$ -	\$ -	\$ -	
34	SJO Staff (Emp. + 1 Dep.)			\$ 13,656	\$ 540	\$ 98	\$ -	\$ -	\$ 14,294	\$ 921	\$ -	\$ -	\$ 56	\$ -	\$ -	\$ -	\$ -	\$ 34	\$ -	\$ -	\$ -	\$ -	
35	SJO Staff (Emp. + >1 Dep.)			\$ 16,836	\$ 540	\$ 98	\$ -	\$ -	\$ 17,474	\$ 921	\$ -	\$ -	\$ 56	\$ -	\$ -	\$ -	\$ -	\$ 34	\$ -	\$ -	\$ -	\$ -	
36	SJO Staff (Declined Med.Ins.)			\$ 2,520	\$ 540	\$ 98	\$ -	\$ -	\$ 3,158	\$ 921	\$ -	\$ -	\$ 56	\$ -	\$ -	\$ -	\$ -	\$ 34	\$ -	\$ -	\$ -	\$ -	
37	SJO (Emp. Only) (Declined Vision)			\$ 9,744	\$ 540	\$ -	\$ -	\$ -	\$ 10,284	\$ 921	\$ -	\$ -	\$ 56	\$ -	\$ -	\$ -	\$ -	\$ 34	\$ -	\$ -	\$ -	\$ -	
38	SJO (Emp. + 1) (Declined Vision)			\$ 13,656	\$ 540	\$ -	\$ -	\$ -	\$ 14,196	\$ 921	\$ -	\$ -	\$ 56	\$ -	\$ -	\$ -	\$ -	\$ 34	\$ -	\$ -	\$ -	\$ -	

Non-Salary-Driven Benefits

FY 2018-19

Superior Court - Humboldt

Note: Replace "Enter Title" with the benefit title.

A	B	C	D	X
Employee Org. Row #	Employee Organizational Unit Name	Bargaining Unit Name	Union Name	Enter Title
1	Represented Staff (Emp. Only)	AFSCME - Council 57 - Main Unit	A.F.S.C.M.E.	\$ -
2	Represented Staff (Emp. + 1 Dep.)	AFSCME - Council 57 - Main Unit	A.F.S.C.M.E.	\$ -
3	Represented Staff (Emp. + >1 Dep.)	AFSCME - Council 57 - Main Unit	A.F.S.C.M.E.	\$ -
4	Represented Staff (Declined Med.Ins.)	AFSCME - Council 57 - Main Unit	A.F.S.C.M.E.	\$ -
5	Represented Staff (Emp. Only) (Declined Vision)	AFSCME - Council 57 - Main Unit	A.F.S.C.M.E.	\$ -
6	Represented Staff (Emp. + 1) (Declined Vision)	AFSCME - Council 57 - Main Unit	A.F.S.C.M.E.	\$ -
7	Represented Staff (Emp. + >1) (Declined Vision)	AFSCME - Council 57 - Main Unit	A.F.S.C.M.E.	\$ -
8	Represented Staff (Declined Medical) (Declined Vision)	AFSCME - Council 57 - Main Unit	A.F.S.C.M.E.	\$ -
9	Represented Staff (Emp. Only) (Declined Dental)	AFSCME - Council 57 - Main Unit	A.F.S.C.M.E.	\$ -
10	Represented Staff (Emp. + 1) (Declined Dental)	AFSCME - Council 57 - Main Unit	A.F.S.C.M.E.	\$ -
11	Represented Staff (Emp. + >1) (Declined Dental)	AFSCME - Council 57 - Main Unit	A.F.S.C.M.E.	\$ -
12	Represented Staff (Declined Medical) (Declined Dental)	AFSCME - Council 57 - Main Unit	A.F.S.C.M.E.	\$ -
13	Represented Staff (Emp. Only) (Declined Vision) (Declined Dental)	AFSCME - Council 57 - Main Unit	A.F.S.C.M.E.	\$ -
14	Represented Staff (Emp. + 1) (Declined Vision) (Declined Dental)	AFSCME - Council 57 - Main Unit	A.F.S.C.M.E.	\$ -
15	Represented Staff (Emp. + >1) (Declined Vision) (Declined Dental)	AFSCME - Council 57 - Main Unit	A.F.S.C.M.E.	\$ -
16	Represented Staff (Declined Medical) (Declined Vision) (Declined Dental)	AFSCME - Council 57 - Main Unit	A.F.S.C.M.E.	\$ -
17	M/C/P (Emp. Only)			\$ -
18	M/C/P Staff (Emp. + 1 Dep.)			\$ -
19	M/C/P Staff (Emp. + >1 Dep.)			\$ -
20	M/C/P Staff (Declined Med.Ins.)			\$ -
21	M/C/P (Emp. Only) (Declined Vision)			\$ -
22	M/C/P (Emp. + 1) (Declined Vision)			\$ -
23	M/C/P (Emp. + >1) (Declined Vision)			\$ -
24	M/C/P (Declined Medical) (Declined Vision)			\$ -
25	M/C/P (Emp. Only) (Declined Dental)			\$ -
26	M/C/P (Emp. + 1) (Declined Dental)			\$ -
27	M/C/P (Emp. + >1) (Declined Dental)			\$ -
28	M/C/P (Declined Medical) (Declined Dental)			\$ -
29	M/C/P (Emp. Only) (Declined Vision) (Declined Dental)			\$ -
30	M/C/P (Emp. + 1) (Declined Vision) (Declined Dental)			\$ -
31	M/C/P (Emp. + >1) (Declined Vision) (Declined Dental)			\$ -
32	M/C/P (Declined Medical) (Declined Vision) (Declined Dental)			\$ -
33	SJO (Emp. Only)			\$ -
34	SJO Staff (Emp. + 1 Dep.)			\$ -
35	SJO Staff (Emp. + >1 Dep.)			\$ -
36	SJO Staff (Declined Med.Ins.)			\$ -
37	SJO (Emp. Only) (Declined Vision)			\$ -
38	SJO (Emp. + 1) (Declined Vision)			\$ -

Non-Salary-Driven Benefits

FY 2018-19

Superior Court - Humboldt

Note: Replace "Enter Title" with the benefit title.

A	B	C	D	X
Employee Org. Row #	Employee Organizational Unit Name	Bargaining Unit Name	Union Name	Enter Title
39	SJO (Emp. + >1) (Declined Vision)			\$ -
40	SJO (Declined Medical) (Declined Vision)			\$ -
41	SJO (Emp. Only) (Declined Dental)			\$ -
42	SJO (Emp. + 1) (Declined Dental)			\$ -
43	SJO (Emp. + >1) (Declined Dental)			\$ -
44	SJO (Declined Medical) (Declined Dental)			\$ -
45	SJO (Emp. Only) (Declined Vision) (Declined Dental)			\$ -
46	SJO (Emp. + 1) (Declined Vision) (Declined Dental)			\$ -
47	SJO (Emp. + >1) (Declined Vision) (Declined Dental)			\$ -
48	SJO (Declined Medical) (Declined Vision) (Declined Dental)			\$ -
49	Reporter (Emp. Only)	AFSCME - Council 57 - Reporters	A.F.S.C.M.E.	\$ -
50	Reporter (Emp. + 1 Dep.)	AFSCME - Council 57 - Reporters	A.F.S.C.M.E.	\$ -
51	Reporter (Emp. + >1 Dep.)	AFSCME - Council 57 - Reporters	A.F.S.C.M.E.	\$ -
52	Reporter (Declined Med.Ins.)	AFSCME - Council 57 - Reporters	A.F.S.C.M.E.	\$ -
53	Reporter (Emp. Only) (Declined Vision)	AFSCME - Council 57 - Reporters	A.F.S.C.M.E.	\$ -
54	Reporter (Emp. + 1) (Declined Vision)	AFSCME - Council 57 - Reporters	A.F.S.C.M.E.	\$ -
55	Reporter (Emp. + >1) (Declined Vision)	AFSCME - Council 57 - Reporters	A.F.S.C.M.E.	\$ -
56	Reporter (Declined Medical) (Declined Vision)	AFSCME - Council 57 - Reporters	A.F.S.C.M.E.	\$ -
57	Reporter (Emp. Only) (Declined Dental)	AFSCME - Council 57 - Reporters	A.F.S.C.M.E.	\$ -
58	Reporter (Emp. + 1) (Declined Dental)	AFSCME - Council 57 - Reporters	A.F.S.C.M.E.	\$ -
59	Reporter (Emp. + >1) (Declined Dental)	AFSCME - Council 57 - Reporters	A.F.S.C.M.E.	\$ -
60	Reporter (Declined Medical) (Declined Dental)	AFSCME - Council 57 - Reporters	A.F.S.C.M.E.	\$ -
61	Reporter (Emp. Only) (Declined Vision) (Declined Dental)	AFSCME - Council 57 - Reporters	A.F.S.C.M.E.	\$ -
62	Reporter (Emp. + 1) (Declined Vision) (Declined Dental)	AFSCME - Council 57 - Reporters	A.F.S.C.M.E.	\$ -
63	Reporter (Emp. + >1) (Declined Vision) (Declined Dental)	AFSCME - Council 57 - Reporters	A.F.S.C.M.E.	\$ -
64	Reporter (Declined Medical) (Declined Vision) (Declined Dental)	AFSCME - Council 57 - Reporters	A.F.S.C.M.E.	\$ -
65	Interpreter	Region 2 C.F.I. - Local 39521	C.F.I.	\$ -
66	Temporary Help			\$ -

Retirement Benefits

Superior Court - Humboldt

Retirement Table

A	B	C	D	E	F
Retirement Row #	Retirement Plan Code Number	Retirement Plan Name	Employer's Retirement Contribution Percentage	Employee Retirement Contribution Percentage Paid by Court	Total Court Contribution Rate (D + E)
1	103 - A	CalPERS Miscellaneous - Normal & UAL Costs	28.542%	0.000%	28.542%
2	103 - B	CalPERS Miscellaneous - Normal & UAL Costs	28.542%	0.000%	28.542%
3	PEPRA	CalPERS Miscellaneous - Normal & UAL Costs	28.542%	0.000%	28.542%
4	Extra-Help	Extra-Help staff not participating in Retirement	0.000%	0.000%	0.000%
5			0.000%	0.000%	0.000%
6			0.000%	0.000%	0.000%
7			0.000%	0.000%	0.000%
8			0.000%	0.000%	0.000%
9			0.000%	0.000%	0.000%
10			0.000%	0.000%	0.000%
11			0.000%	0.000%	0.000%
12			0.000%	0.000%	0.000%
13			0.000%	0.000%	0.000%
14			0.000%	0.000%	0.000%
15			0.000%	0.000%	0.000%
16			0.000%	0.000%	0.000%
17			0.000%	0.000%	0.000%
18			0.000%	0.000%	0.000%
19			0.000%	0.000%	0.000%
20			0.000%	0.000%	0.000%

Base Salary Adjustment

Superior Court - Humboldt

Base Salary Adjustment Table

A	B	C	D	E	F	G	H	I
Row #	Employee Organizational Unit Name	Employee Org Row	Will Receive a Base Salary Adjustment this Fiscal Year? ("Yes", "No", or "Don't Know")	If "Yes" in Column D, Effective Date?	If "Yes" in Column D, Adjustment Type	If "Other" in Column F, Please Explain the Type of Adjustment	If "Don't Know" in Column D, On What Date Will Court Know If an Adjustment Will Be Made?	If "Yes" in Column D, Salary Adjustment %
1	Represented Staff (Emp. Only)	1	Don't Know					0.00%
2	Represented Staff (Emp. + 1 Dep.)	2	Don't Know					0.00%
3	Represented Staff (Emp. + >1 Dep.)	3	Don't Know					0.00%
4	Represented Staff (Declined Med.Ins.)	4	Don't Know					0.00%
5	Represented Staff (Emp. Only) (Declined Vision)	5	Don't Know					0.00%
6	Represented Staff (Emp. + 1) (Declined Vision)	6	Don't Know					0.00%
7	Represented Staff (Emp. + >1) (Declined Vision)	7	Don't Know					0.00%
8	Represented Staff (Declined Medical) (Declined Vision)	8	Don't Know					0.00%
9	Represented Staff (Emp. Only) (Declined Dental)	9	Don't Know					0.00%
10	Represented Staff (Emp. + 1) (Declined Dental)	10	Don't Know					0.00%
11	Represented Staff (Emp. + >1) (Declined Dental)	11	Don't Know					0.00%
12	Represented Staff (Declined Medical) (Declined Dental)	12	Don't Know					0.00%
13	Represented Staff (Emp. Only) (Declined Vision) (Declined Dental)	13	Don't Know					0.00%
14	Represented Staff (Emp. + 1) (Declined Vision) (Declined Dental)	14	Don't Know					0.00%

Base Salary Adjustment

Superior Court - Humboldt

Base Salary Adjustment Table

A	B	C	D	E	F	G	H	I
Row #	Employee Organizational Unit Name	Employee Org Row	Will Receive a Base Salary Adjustment this Fiscal Year? ("Yes", "No", or "Don't Know")	If "Yes" in Column D, Effective Date?	If "Yes" in Column D, Adjustment Type	If "Other" in Column F, Please Explain the Type of Adjustment	If "Don't Know" in Column D, On What Date Will Court Know If an Adjustment Will Be Made?	If "Yes" in Column D, Salary Adjustment %
15	Represented Staff (Emp. + >1) (Declined Vision) (Declined Dental)	15	Don't Know					0.00%
16	Represented Staff (Declined Medical) (Declined Vision) (Declined Dental)	16	Don't Know					0.00%
17	M/C/P (Emp. Only)	17	Don't Know					0.00%
18	M/C/P Staff (Emp. + 1 Dep.)	18	Don't Know					0.00%
19	M/C/P Staff (Emp. + >1 Dep.)	19	Don't Know					0.00%
20	M/C/P Staff (Declined Med.Ins.)	20	Don't Know					0.00%
21	M/C/P (Emp. Only) (Declined Vision)	21	Don't Know					0.00%
22	M/C/P (Emp. + 1) (Declined Vision)	22	Don't Know					0.00%
23	M/C/P (Emp. + >1) (Declined Vision)	23	Don't Know					0.00%
24	M/C/P (Declined Medical) (Declined Vision)	24	Don't Know					0.00%
25	M/C/P (Emp. Only) (Declined Dental)	25	Don't Know					0.00%
26	M/C/P (Emp. + 1) (Declined Dental)	26	Don't Know					0.00%
27	M/C/P (Emp. + >1) (Declined Dental)	27	Don't Know					0.00%
28	M/C/P (Declined Medical) (Declined Dental)	28	Don't Know					0.00%
29	M/C/P (Emp. Only) (Declined Vision) (Declined Dental)	29	Don't Know					0.00%
30	M/C/P (Emp. + 1) (Declined Vision) (Declined Dental)	30	Don't Know					0.00%

Base Salary Adjustment

Superior Court - Humboldt

Base Salary Adjustment Table

A	B	C	D	E	F	G	H	I
Row #	Employee Organizational Unit Name	Employee Org Row	Will Receive a Base Salary Adjustment this Fiscal Year? ("Yes", "No", or "Don't Know")	If "Yes" in Column D, Effective Date?	If "Yes" in Column D, Adjustment Type	If "Other" in Column F, Please Explain the Type of Adjustment	If "Don't Know" in Column D, On What Date Will Court Know If an Adjustment Will Be Made?	If "Yes" in Column D, Salary Adjustment %
31	M/C/P (Emp. + >1) (Declined Vision) (Declined Dental)	31	Don't Know					0.00%
32	M/C/P (Declined Medical) (Declined Vision) (Declined Dental)	32	Don't Know					0.00%
33	SJO (Emp. Only)	33	Don't Know					0.00%
34	SJO Staff (Emp. + 1 Dep.)	34	Don't Know					0.00%
35	SJO Staff (Emp. + >1 Dep.)	35	Don't Know					0.00%
36	SJO Staff (Declined Med.Ins.)	36	Don't Know					0.00%
37	SJO (Emp. Only) (Declined Vision)	37	Don't Know					0.00%
38	SJO (Emp. + 1) (Declined Vision)	38	Don't Know					0.00%
39	SJO (Emp. + >1) (Declined Vision)	39	Don't Know					0.00%
40	SJO (Declined Medical) (Declined Vision)	40	Don't Know					0.00%
41	SJO (Emp. Only) (Declined Dental)	41	Don't Know					0.00%
42	SJO (Emp. + 1) (Declined Dental)	42	Don't Know					0.00%
43	SJO (Emp. + >1) (Declined Dental)	43	Don't Know					0.00%
44	SJO (Declined Medical) (Declined Dental)	44	Don't Know					0.00%
45	SJO (Emp. Only) (Declined Vision) (Declined Dental)	45	Don't Know					0.00%
46	SJO (Emp. + 1) (Declined Vision) (Declined Dental)	46	Don't Know					0.00%
47	SJO (Emp. + >1) (Declined Vision) (Declined Dental)	47	Don't Know					0.00%

Base Salary Adjustment

Superior Court - Humboldt

Base Salary Adjustment Table

A	B	C	D	E	F	G	H	I
Row #	Employee Organizational Unit Name	Employee Org Row	Will Receive a Base Salary Adjustment this Fiscal Year? ("Yes", "No", or "Don't Know")	If "Yes" in Column D, Effective Date?	If "Yes" in Column D, Adjustment Type	If "Other" in Column F, Please Explain the Type of Adjustment	If "Don't Know" in Column D, On What Date Will Court Know If an Adjustment Will Be Made?	If "Yes" in Column D, Salary Adjustment %
48	SJO (Declined Medical) (Declined Vision) (Declined Dental)	48	Don't Know					0.00%
49	Reporter (Emp. Only)	49	Don't Know					0.00%
50	Reporter (Emp. + 1 Dep.)	50	Don't Know					0.00%
51	Reporter (Emp. + >1 Dep.)	51	Don't Know					0.00%
52	Reporter (Declined Med.Ins.)	52	Don't Know					0.00%
53	Reporter (Emp. Only) (Declined Vision)	53	Don't Know					0.00%
54	Reporter (Emp. + 1) (Declined Vision)	54	Don't Know					0.00%
55	Reporter (Emp. + >1) (Declined Vision)	55	Don't Know					0.00%
56	Reporter (Declined Medical) (Declined Vision)	56	Don't Know					0.00%
57	Reporter (Emp. Only) (Declined Dental)	57	Don't Know					0.00%
58	Reporter (Emp. + 1) (Declined Dental)	58	Don't Know					0.00%
59	Reporter (Emp. + >1) (Declined Dental)	59	Don't Know					0.00%
60	Reporter (Declined Medical) (Declined Dental)	60	Don't Know					0.00%
61	Reporter (Emp. Only) (Declined Vision) (Declined Dental)	61	Don't Know					0.00%
62	Reporter (Emp. + 1) (Declined Vision) (Declined Dental)	62	Don't Know					0.00%
63	Reporter (Emp. + >1) (Declined Vision) (Declined Dental)	63	Don't Know					0.00%

Base Salary Adjustment

Superior Court - Humboldt

Base Salary Adjustment Table

A	B	C	D	E	F	G	H	I
Row #	Employee Organizational Unit Name	Employee Org Row	Will Receive a Base Salary Adjustment this Fiscal Year? ("Yes", "No", or "Don't Know")	If "Yes" in Column D, Effective Date?	If "Yes" in Column D, Adjustment Type	If "Other" in Column F, Please Explain the Type of Adjustment	If "Don't Know" in Column D, On What Date Will Court Know If an Adjustment Will Be Made?	If "Yes" in Column D, Salary Adjustment %
64	Reporter (Declined Medical) (Declined Vision) (Declined Dental)	64	Don't Know					0.00%
65	Interpreter	65	Don't Know					0.00%
66	Temporary Help	66	Don't Know					0.00%

Facility Table

Superior Court - Humboldt

Facility Table

A	B	C
Facility Row #	Facility Code Number	Facility Name
1	1	Humboldt County Courthouse (825 5th St., Eureka)
2		