## REQUEST TYPE: FULL-TIME POSITION

| 120 | $\frac{\text { Legal Services }}{\text { Department \# }}$ |
| :---: | :---: |
| Department Name <br> Pounty Attorney |  |
| Priority \# Title |  |


|  | ADDITIONAL PERSONNEL COST CALCULATION |  |
| :---: | :--- | :---: |
| New Position |  | Account |
| $\$ 180,250.00$ | Salary | 4104 |
| $\$ 15,000.00$ | 457 Contribution | 4131 |
| $13,790.00$ | Taxes | 4110 |
| $27,335.00$ | Retirement | 4131 |
| $28,300.00$ | Health | 4121 |
| $1,567.00$ | Dental \& Vision | 4123 |
| 468.00 | Life | 4122 |
| 130.00 | AD\&D | 4122 |
| 697.00 | Short Term Disability | 4121 |
| $\mathbf{\$ 2 6 7 , 5 3 7 . 0 0}$ | Total Additional Personnel Costs |  |


| FY 2022 | FY 2023 |  |
| ---: | ---: | ---: |
| $\$ 90,125.00$ | $\$ 90,125.00$ |  |
| $7,500.00$ | $7,500.00$ | $21,167.50$ |
| $6,895.00$ | $6,895.00$ |  |
| $13,667.50$ | $13,667.50$ |  |
| $14,150.00$ | $14,150.00$ | $14,498.50$ |
| 783.50 | 783.50 |  |
| 234.00 | 234.00 |  |
| 65.00 | 65.00 | 299.00 |
| 348.50 | 348.50 |  |
| $\$ 133,768.50$ | $\$ 133,768.50$ | $\$ 267,537.00$ |

JUSTIFICATION (please provide a short explanation of your request on the lines below):
Please note taxes, retirement, and benefits are all estimates based on the maximum potential cost.

PERSONNEL EQUIPMENT REQUEST (list all equipment required and estimated cost)
**Do not add these estimated costs to your department's operating budget. It is calculated separately by OMB.

| EQUIPMENT DESCRIPTION (uniform, gun, fire safety suit, vehicle, computer, cell phone etc.) | ESTIMATED COST |  |
| :--- | :--- | ---: |
| Cell phone allowance -4421 A | $\$$ | $1,500.00$ |
|  | $\$$ | - |
|  | $\$$ | - |

$750.00 \quad 750.00$

