



REQUEST TYPE: FULL-TIME POSITION

1117 Department #	Parks and Leisure Department Name
Director of Parks and Community Services Position Title	 Priority #

ADDITIONAL PERSONNEL COST CALCULATION

<i>New Position</i>	
\$120,000.00	Salary Requested (use midpoint of paygrade)
\$5,200.00	Car Allowance
9,577.80	Taxes
10,366.22	Retirement
24,765.84	Health
47.88	Dental
311.04	Life
86.40	AD&D
463.57	Short Term Disability
\$170,818.75	Total Additional Personnel Costs

JUSTIFICATION (please provide a short explanation of your request on the lines below):

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	\$ 600.00
	\$ -
	\$ -