## State Controller's Office - Local Government Programs and Services Division

Special Districts - Local Government Compensation Report - Calendar Year 2018

Refer to the 2018 GCC Reporting Instructions for more details

## Entity Name Amador - Township No. 2 Cemetery District

## Preparer Contact Information

Preparer Name Carole Meltzer Phone Number 209-274-0274

E-mail Address info@ionecemetery.com

Human Resources Web Page		
Employees Hold more than One Position?		(Enter 'Yes' or 'No')
Do the amounts in the Defined Benefit Plan column include payment		
toward the pension unfunded liability?	No	(Enter 'Yes' or 'No')

	Elected			Multiple	Annual	Annual	Total Wages Subject to Medicare (Box 5 of W-2):					able Retirement Deferred ed Plan: Defined Benefit Compensation/ fit Employees' Plan: Defined			Health,
	Official			Positions	Salary	Salary	Annual		Lump Sum		Pension	Share Paid by	Employer's	Contribution	Dental,
Line #	Enter 'Y'	Department	Classification	Footnote	Minimum	Maximum	<b>Regular Pay</b>	Overtime Pay	Pay	Other Pay	Formula	Employer	Share	Plan	Vision
1.		<b>Cemetery Operations</b>	Part time office manager	No	0	0	16,442	0	0	0	0	0	0	0	0
2.		<b>Cemetery Operations</b>	Part time grounds manager	No	0	0	11,665	0	0	0	0	0	0	0	0
3.		Governing Body	Board of Trustees		0	0	0	0	0	1,100	0	0	0	0	0
4.		Governing Body	Board of Trustees		0	0	0	0	0	1,000	0	0	0	0	0
5.		Governing Body	Board of Trustees		0	0	0	0	0	1,100	0	0	0	0	0
6.		Governing Body	Board of Trustees		0	0	0	0	0	1,200	0	0	0	0	0
7.		Governing Body	Board of Trustees		0	0	0	0	0	1,200	0	0	0	0	0
8.		Governing Body	Board of Trustees		0	0	0	0	0	100	0	0	0	0	0

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