



Storey County Board of County Commissioners Agenda Action Report

Meeting date: December 5, 2017

Estimate of time required: 20 min.

Agenda: Consent ☐ Regular agenda ☒ Public hearing required ☐

1. **Title:** Discussion and possible action. Review of monetary payments, described as buyouts, to two department heads in December 2016, January 2017 and June 2017 by the County Manager. The Board may take action, including but not limited to, determining whether the county manager had authority to make the payments, setting a review of the county manager's job performance, referring the matter to an outside agency for evaluation for violation of NRS, or determine whether to try to recover the part or all of the payments.

2. **Recommended motion:** The Board should decide on a course of action of how to deal with these payments and make any appropriate motions.

3. **Prepared by:** Hugh Gallagher.

Department: Comptroller

Tel: 847-1006

4. **Staff summary:** The Board is faced with a decision about how it wants to deal with the payments made by the County Manager to department heads within the last year. The payments are detailed in the attached exhibit.

A. The Board does have written Policy 042 for any agreements or contracts to require review by the county manager, comptroller and district attorney. This was not done.

B. There are no written materials in relation to the agreement provided by the County Manager for these payments.

C. The Board should decide if it wants to review the County Manager's actions in making these payments and for not informing the Board.

5. **Supporting materials:** Comptroller report and exhibits.

6. **Fiscal impact:** A budget augmentation to cover these payments has been approved. Further fiscal impacts depends on the Board decides to do.

7. **Legal review required:** Yes

____ District Attorney

8. **Reviewed by:**

____ Department Head

Department Name: Commissioner's Office

____ County Manager

Other agency review: _____

9. **Board action:**

☐ Approved

☐ Approved with Modifications

☐ Denied

☐ Continued

Agenda Item No. 21

November 28, 2017

Storey County Commission

Commissioners;

Per your request at a regularly scheduled meeting of the Storey County Board of County Commissioners meeting on October 17, 2017, the following represents additional monetary payments to three Storey County Department Heads in December 2016, January 2017 and June 2017, who had already announced retirement dates. In an effort to disclose each of these transactions, I have listed the following Index and will comment on each schedule.

Exhibit A	Storey County Retirement Benefits
Exhibit B	Mike Nevin
Exhibit C	Dean Haymore
Exhibit D	Gary Hames

Exhibit A Storey County Retirement Payments

This exhibit reveals total payments to Mike Nevin, Dean Haymore and Gary Hames in the amount of \$ 214,410.14. Monetary payments to the above employees who opted into the "Nevada Public Employee's Deferred Compensation Program" in the amount of \$ 144,215.41 and were distributed as follows:

Mike Nevin	\$ 39,335.61
Dean Haymore	\$ 49,793.01
Gary Hames	\$ 55,086.79

The amount of each individual's payment into the Deferred Compensation Program was equal to one year of additional PERS Retirement calculated as if each recipient's retirement date was December 2016 as reflected in Exhibits (A-1 through A-3).

This exhibit also reflects an Annual Leave and Sick Leave Buyout for Mike Nevin in the amount of \$ 24,670.00. In addition a PERS payment was made on behalf of Gary Hames in the amount of \$ 45,534.73.

Monetary Payments to Mike Nevin

Exhibit A indicates monetary payments in the amount of \$ 39,335.61 and an Annual Leave and Sick Leave buyout of \$ 24,670.00.

Exhibit B reflects how the first transaction was completed.

Nevada Deferred Compensation (VOYA) is normally used by employees to contribute pre-tax income from their payroll checks. In this particular case, this was the only document presented to the Comptroller's Administrative Assistant during the payroll week ended December 16, 2016. You will notice next to the VOYA insignia is a \$36,000 amount and the description "Note: For Buyout".

Exhibit B-1 reflects the same type of transaction for \$3,335.61, for the payroll period ending January 13, 2017. There is also no initials or signature authorizing this transaction, only the word "For Buyout Balance".

Exhibit B-2 reflects a "Notice of Termination of Employment" for Mike Nevin. This represents the entire monetary transaction on January 13, 2017 and the categories of payment. Of particular concern is the calculation of Vacation pay of \$ 19,670.00. Under the current AFSCME Collective Bargaining Agreement dated November 1, 2016 and effective July 1, 2016, the terminated employee will be compensated "for the total number of annual leave hours accrued (up to 240 hours).

Exhibit B-3 Reflects comments and documentation from the Human Resources Department and County Manager on the Vacation Pay for Mike Nevin.

Monetary Payments to Dean Haymore

Exhibit A indicates monetary payments in the amount of \$ 49,783.39.

Exhibit C reflects the initial payment of \$ 27,600 to VOYA for the payroll week ended December 16, 2016. This document is noted "For buyout".

Exhibit C-1 reflects the second half of the payment of \$ 22,183.01 for the payroll week ended June 16, 2017. Note at the bottom of the page that this transaction was approved by the County Manager on June 13, 2017.

Monetary Payments to Gary Hames

Exhibit A indicates monetary payments in the amount of \$ 55,086.79 and a contribution to the Nevada Public Retirement System (PERS) OF \$ 45,534.73.

Exhibit D reflects the initial payment of \$ 35,000.00 into a VOYA deferred income account for the payroll week ended December 16, 2016. The explanation on this document was described as "Note: For Buyout".

Exhibit D-1 reflects the second half of the payment of \$ 20,086.79 for the payroll week ended June 16, 2017. Note at the bottom of the page that this transition was approved by the County Manager on June 13, 2017.

Exhibit D-2 represents a document from Nevada PERS with regard to a "Purchase of Service Agreement" on behalf of Gary Hames. This Document was approved by County Manager Pat Whitten on June 13, 2017. At the present time, we are unable to confirm the payment amount of \$ 45,534.75 from the Nevada Public Employee Retirement System (NVPERS).

Conclusion

In summary, these transactions reflect a Buy-Out for early separation of service. There is however, no documentation to demonstrate that these transactions are similar to those constructed in the past. Past recipients were required to complete and sign a document similar to (Exhibit E). If this was not considered Early Separation but additional remuneration for quality of service, then a Pay Request form (Exhibit F) should have been completed.

Respectively Submitted,


Hugh Gallagher

Storey County Comptroller

STOREY COUNTY
RETIREMENT PAYMENTS

EXHIBIT
A



Service Credit Purchase Estimator

You can use our calculator below to give you an estimated cost for the purchase of one year of service credit. This cost is based on your salary times the number of months purchased times the actuarial percentage based on your age.



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Informational Programs
2015 Facts You Should Know
2016 Pensionomics
Positive Impact for Nevada
September 2013

Special note for part-time employees: You should adjust the salary amount you input to reflect what you would earn if you had worked full-time. A part-time employee is a member who works less than full-time according to the employer's full-time work schedule.

Which employee group do you belong to?

Which employee group do you belong to?

☒ Regular ☐ Police / Fire

What is your current annual salary (No Comma Necessary)?

\$ 112709.50 ?

What is your current age?

62 years

Total lump sum cost for a 1 year purchase (Principal):

\$ 39335.61 ?

Tell me more

If you decide to purchase, you must first contact PERS to request a purchase of service agreement.



CERTIFIED
ENTERPRISE

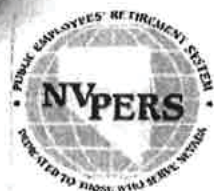
39,335.61

- 36,000.00 PAID OUT IN 2016

3,335.61 DUE JAN 2017

EXHIBIT

A-1



Haymore

Public Employees' Retirement System of Nevada
693 W. Nye Lane, Carson City, NV 89703 (775) 687-4200 Fax (775) 687-5131
5740 S. Eastern Ave. Suite 120, Las Vegas, NV 89119 (702) 486-3900 Fax (702) 678-6934
Toll Free 1-866-473-7768 Website: www.nvpers.org Email: nvpers@nvpers.org

Purchase of Service Program

If you have five years of creditable service you may purchase up to a maximum of five years of service credit. The cost to purchase service is based on your average compensation times the number of months purchased times the actuarial percentage based on your age. Purchases may be paid in a lump sum, through installments (at 8% interest), or through direct rollover of deferred funds. If you decide to purchase, you must first contact PERS to request a purchase-of-service agreement.

Special note for part-time employees: Your average compensation is calculated on salary you would have received had you worked full-time. A part-time employee is a member who works less than full-time according to the employer's full-time work schedule.

1. **Your Average Monthly Compensation** = \$ 12,420.91
(Average of your 36 highest consecutive months of salary)
2. **Multiplied by the # of months to be purchased** X 12.00
= \$ 149,050.92
3. **Purchase Percentage Based on Age** = X 33.40 %
(Find your age and corresponding % from table below)
4. **Estimated lump sum cost to purchase additional service** = \$ 49,783.01
(Principal)

Purchase Percentages for Regular Members:				Purchase Percentages for Police and Firemen:			
Age	Percent	Age	Percent	Age	Percent	Age	Percent
30 or under	16.9	55	38.6	30 or under	24.5	55	39.4
31	17.5	56	37.9	31	25.2	56	38.8
32	18.1	57	37.2	32	25.8	57	38.1
33	18.7	58	36.5	33	26.5	58	37.4
34	19.3	59	35.7	34	27.3	59	36.7
35	19.9	60	35.0	35	28.0	60	36.0
36	20.6	61	34.2	36	28.8	61	35.3
37	21.3	62	33.4	37	29.6	62	34.5
38	22.0	63	32.6	38	30.4	63	33.7
39	22.7	64	31.8	39	31.2	64	33.0
40	23.4	65	31.0			65	32.2
41	24.2	66	30.1				
42	25.0	67	29.3				
43	25.9	68	28.4				
44	26.7	69	27.6				
45	27.6	70	26.7				
46	28.5	71	25.8				
47	29.5	72	24.9				
48	30.5	73	24.1				
49	31.5	74	23.2				
50	32.6	75	22.3				
51	33.7	76	21.4				
52	34.9	77	20.5				
53	36.0	78	19.6				
54	37.3	79	18.7				
		80	17.8				

Jessica Polisso
Retirement Examiner I

693 W. Nye Lane
Carson City, NV 89703
(775) 687-4200
Fax: (775) 687-5131
Toll Free: (866) 473-7768
www.nvpers.org

54	40.1	80	18.9
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Welcome Back, GARY HAMES

Email : ghames@storeycounty.org

Last Login : Jan 16, 2015 at 11:41:29

Service Credit Purchase Estimator

You can use our calculator below to give you an estimated cost for the purchase of one year of service credit. This cost is based on your salary times the number of months purchased times the actural percentage based on your age.

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Special note for part-time employees: You should adjust the salary amount you input to reflect what you would earn if you had worked full-time. A part-time employee is a member who works less than full-time according to the employer's full-time work schedule.

Enter Information

Which employee group do you belong to?

☐ Regular ☒ Police / Fire

What is your current annual salary (No Comma Necessary)?

What is your current age?

years

[Calculate](#)

Calculation Results

Total lump sum cost for a 1 year purchase (Principal):

[Tell me more](#)

If you decide to purchase, you must first contact PERS to request a purchase of service agreement.



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1-Year = \$55,086.79

EXHIBIT

A-3

* For Payroll DATED 12-16-16



**Nevada Public Employees' Deferred Compensation Program (NDC)
Payroll Contribution Form**

#904

Name Michael E. Nevio Employee ID# _____

Agency Storey County Daytime Telephone 775-847-0417

☐ Change Paycheck Deduction

☒ New Paycheck Deduction ****STOP HERE!!****
****You must complete an EZ Enrollment form or
enroll online with Voya Financial® to set up an account.**

EMPLOYER: ☐ State of Nevada ☐ NV System of Higher Education (NSHE) ☒ Alliance Partner
(City, County, Non-State)

PAYCHECK DEDUCTION AMOUNT: contribute
I authorize my Employer to deduct the following amount(s) per pay period (minimum \$12.50 per pay period)
from my salary to NDC:

* **NOTE: For Buyout**
Pre-Tax (Regular) Post-Tax (Roth)

VOYA
FINANCIAL

\$ 36,000 \$ _____

If you wish to cancel/suspend current payroll deduction, please indicate \$0. This form will supersede any previous form(s) on file.

CHECK BOX IF APPLICABLE*:

☐ **Age 50+ Catch-Up:** Date of Birth ____/____/____
You must reach age 50 by the end of the calendar year you are electing to use this catch-up provision.

☒ **Special 457(b) Catch-Up Election**
You must include a copy of the investment provider calculation sheet submitted to the recordkeeper to ensure eligibility.

*Please note that you cannot use both the Age 50+ and the Special Catch-up provision at the same time. You need to choose the option most beneficial to you.

EFFECTIVE DATE:

This agreement will be effective the first full payroll period of the month following the date this form is received and processed by the payroll department.

Signature Michael E. Nevio Date 12-8-2016

Please send the completed form to NDC
Fax: 775.684.3399
Email: deferredcomp@defcomp.nv.gov

Voya Financial® 1.866.464.6832

Nevada State Library and Archives Building, 100 N. Stewart Street, Suite 210, Carson City, NV
Phone 775.684.3397 | Fax 775.684.3399 | Website <http://defcomp.nv.gov/>

EXHIBIT

B

FOR payroll DATED 1-13-2017



**Nevada Public Employees' Deferred Compensation Program (NDC)
Payroll Contribution Form**

904

Name Michael Noun Employee ID# _____

Agency Storey County Daytime Telephone 775-847-0417

☒ Change Paycheck Deduction

☐ New Paycheck Deduction ****STOP HERE!****
****You must complete an EZ Enrollment form or
enroll online with Voya Financial® to set up an account.**

EMPLOYER: ☐ State of Nevada ☐ NV System of Higher Education (NSHE) ☒ Alliance Partner
(City, County, Non-State)

PAYCHECK DEDUCTION AMOUNT:

I authorize my Employer to deduct the following amount(s) per pay period (minimum \$12.50 per pay period)
from my salary to NDC:

* For Buyout balance

Pre-Tax (Regular)

Post-Tax (Roth)



\$ 3,335.61 \$ _____

If you wish to cancel/suspend current payroll deduction, please indicate \$0. This form will supersede any
previous form(s) on file.

CHECK BOX IF APPLICABLE*:

☐ **Age 50+ Catch-Up:** Date of Birth ____/____/____
You must reach age 50 by the end of the calendar year you are electing to use this catch-up provision.

☒ **Special 457(b) Catch-Up Election**
You must include a copy of the investment provider calculation sheet submitted to the
recordkeeper to ensure eligibility.

*Please note that you cannot use both the Age 50+ and the Special Catch-up provision at the same time. You need
to choose the option most beneficial to you.

EFFECTIVE DATE:

This agreement will be effective the first full payroll period of the month following the date this form is
received and processed by the payroll department.

Signature Michael Noun

Date 12/30/16

Please send the completed form to NDC

Fax: 775.684.3399

Email: deferredcomp@defcomp.nv.gov

Voya Financial® 1.866.464.6832

Nevada State Library and Archives Building, 100 N. Stewart Street, Suite 210, Carson City,
Phone 775.684.3397 | Fax 775.684.3399 | Website <http://defcomp.nv.gov/>

EXHIBIT

B-1

**STOREY COUNTY
NOTICE OF TERMINATION OF EMPLOYMENT**

Devin
LAST NAME

Michael
FIRST

E.
MI

Hire Date
1-1-1980
Rate of Pay

Last Day Worked
12-30-2016

Date Terminated
12-31-2016

Position
Public Works Director

1. Has employee returned all assigned County Property including:
 - a. _____ Keys
 - b. _____ Tools and Equipment
 - c. _____ Manuals, Books, Charge Cards, etc.
 - d. _____ Cellular phone
 - e. _____ Uniform, including pants, button-up shirt, hat, t-shirt, and any other Fire District owned items.
 - f. _____ Badge
2. (Optional) Supervisor and or employee explanation or comments regarding termination: _____

I certify under penalty of perjury that the above is correct.

Michael E. Devin
Employee Signature

12/27/2016
Date

I certify under penalty of perjury that the above is correct

Michael E. Devin
Employer Signature

12/27/2016
Date

PAYROLL ONLY:

Regular Pay \$ 0 Overtime Pay \$ _____ Other \$ _____
Vacation Pay \$ 19670.00 Sick Leave Pay \$ 5000.00 Sev 3335.61
TOTAL FINAL CHECK \$ _____ Date Paid: _____ Agreement Y / N DD / LC

Gross 28,006.04

Delete: AL/SL ☒
Deductions ☒

Termed AS400 ☒

Copy for PERS ☒
dtd 1.20.17

EXHIBIT

B-2

Melissa Field

From: Pat Whitten
Sent: Thursday, January 12, 2017 11:39 AM
To: Austin Osborne
Cc: Hugh Gallagher; Jennifer McCain; Melissa Field; Jessie Fain
Subject: Re: Mike Nevin

I concur with Austin's comments and actions.

Pat Whitten - Storey County Manager

Sent from my iPad

On Jan 12, 2017, at 11:29 AM, Austin Osborne <aosborne@storeycounty.org> wrote:

Hugh,
Mike Nevin announced his retirement at the time that the former CBA and current policy were and are effective, respectively. Bargaining with the AFSCME group at that time was still in negotiations. As you know we make strong effort to treat all employees, management and non-management, equitably, that including the offering of sick and annual leave accrual and payout. Mike's leave payout shall conform to current policy and it is consistent with the prior CBA.
Austin

From: Hugh Gallagher
Sent: Thursday, January 12, 2017 9:06 AM
To: Austin Osborne
Subject: Mike Nevin

Austin
Just a reminder that we need the explanation pertaining to Mike Nevin's adjustment on Annual Leave. I don't feel comfortable issuing the check until I have the directive.

Thanks,

Hugh

<image001.jpg>

Hugh Gallagher
Storey County Comptroller
PO BOX 432
Virginia City, NV 89440

Office: 775-847-1006
Cell: 775-291-4508
Fax: 775-847-1151

Storey County is an Equal Opportunity Provider

For Payroll DATED 12-16-16



**Nevada Public Employees' Deferred Compensation Program (NDC)
Payroll Contribution Form**

504

Name DARRELL DEAN HAYMORE Employee ID# _____

Agency STOREY COUNTY Daytime Telephone _____

☒ Change Paycheck Deduction

☐ New Paycheck Deduction ****STOP HERE!!****
****You must complete an EZ Enrollment form or
enroll online with Voya Financial® to set up an account.**

EMPLOYER: ☐ State of Nevada ☐ NV System of Higher Education (NSHE) ☒ Alliance Partner
(City, County, Non-State)

PAYCHECK DEDUCTION AMOUNT: CONTINGENT

I authorize my Employer to deduct the following amount(s) per pay period (minimum \$12.50 per pay period) from my salary to NDC:

☒ **NOTE: For buyout**
Pre-Tax (Regular) Post-Tax (Roth)
\$ 27,600 \$ _____

If you wish to cancel/suspend current payroll deduction, please indicate \$0. This form will supersede any previous form(s) on file.

CHECK BOX IF APPLICABLE*:

☐ **Age 50+ Catch-Up:** Date of Birth ____/____/____
You must reach age 50 by the end of the calendar year you are electing to use this catch-up provision.

☒ **Special 457(b) Catch-Up Election**
You must include a copy of the investment provider calculation sheet submitted to the recordkeeper to ensure eligibility.

*Please note that you cannot use both the Age 50+ and the Special Catch-up provision at the same time. You need to choose the option most beneficial to you.

EFFECTIVE DATE:

This agreement will be effective the first full payroll period of the month following the date this form is received and processed by the payroll department.

Signature [Signature] Date 7 Dec 2016

Please send the completed form to NDC
Fax: 775.684.3399
Email: deferredcomp@defcomp.nv.gov

Voya Financial® 1.866.464.6832

Nevada State Library and Archives Building, 100 N. Stewart Street, Suite 210, Carson City
Phone 775.684.3397 | Fax 775.684.3399 | Website <http://defcomp.nv.gov/>

EXHIBIT

For Payroll DATED 6-16-17



**Nevada Public Employees' Deferred Compensation Program (NDC)
Payroll Contribution Form**

#304

Name DARRELL DEAN HAYMORE Employee ID# _____

Agency STOREY COUNTY Daytime Telephone 742-8226

☒ Change Paycheck Deduction

☐ New Paycheck Deduction ****STOP HERE!!****
****You must complete an EZ Enrollment form or
enroll online with Voya Financial® to set up an account.**

EMPLOYER: ☐ State of Nevada ☐ NV System of Higher Education (NSHE) ☒ Alliance Partner
(City, County, Non-State)

PAYCHECK DEDUCTION AMOUNT:

I authorize my Employer to deduct the following amount(s) per pay period (minimum \$12.50 per pay period)
from my salary to NDC: * NOTE: FOR BUYOUT



Pre-Tax (Regular)

Post-Tax (Roth)

\$ 22,183.01 \$ _____

If you wish to cancel/suspend current payroll deduction, please indicate \$0. This form will supersede any
previous form(s) on file.

CHECK BOX IF APPLICABLE*:

☐ **Age 50+ Catch-Up:** Date of Birth ____/____/____
You must reach age 50 by the end of the calendar year you are electing to use this catch-up provision.

☒ **Special 457(b) Catch-Up Election**
You must include a copy of the investment provider calculation sheet submitted to the
recordkeeper to ensure eligibility.

*Please note that you cannot use both the Age 50+ and the Special Catch-up provision at the same time. You need
to choose the option most beneficial to you.

EFFECTIVE DATE:

This agreement will be effective the first full payroll period of the month following the date this form is
received and processed by the payroll department.

Signature [Signature] Date 8 June 2017

Please send the completed form to NDC

Fax: 775.684.3399

Email: deferredcomp@defcomp.nv.gov

Voya Financial® 1.866.464.6832

Nevada State Library and Archives Building, 100 N. Stewart Street, Suite 210, Carson City
Phone 775.684.3397 | Fax 775.684.3399 | Website <http://defcomp.nv.gov/>

Approved [Signature]
13 JUNE 2017

EXHIBIT

C-1



FOR PAYROLL DATED 12-16-16
Payroll Contribution Form

#912

Name Gary Hames Employee ID# 0912
Agency Fire District (Storey County) Daytime Phone (775) 742-9826

☒ **Change Paycheck Deduction**
Increase, Decrease, Discontinue

☐ **New Paycheck Deduction **STOP HERE!!****
**You must complete an EZ Enrollment form OR
Enroll Online with Voya Financial® to set up an account.

Please initial here if you enrolled online _____

EMPLOYER: ☐ State of Nevada ☐ NV System of Higher Education (NSHE) ☒ Alliance Partner
(City, County, Non-State)

PAYCHECK DEDUCTION AMOUNT: to contribute
I authorize my Employer to deduct the following amount(s) per pay period (minimum \$12.50 per pay period)
from my salary to NDC:

VOYA
FINANCIAL

* Note: For Buyout
Pre-Tax (Regular) Post-Tax (Roth)
\$ 35,000.00 \$ _____

If you wish to cancel/suspend current payroll deduction, please indicate \$0. This form will supersede any previous form(s) on file.

CHECK BOX IF APPLICABLE*:

☐ **Age 50+ Catch-Up:** Date of Birth ____/____/____
You must reach age 50 by the end of the calendar year you are electing to use this catch-up provision.

☒ **Special 457(b) Catch-Up Election**
You must include a copy of the investment provider calculation sheet submitted to the recordkeeper to ensure eligibility.

*Please note that you cannot use both the Age 50+ and the Special Catch-up provision at the same time. You need to choose the option most beneficial to you.

EFFECTIVE DATE:

This agreement will be effective the first payroll period of the month following the date this form is received and processed by the payroll department.

Signature Gary Hames Date 12/25/16

Please send the completed form to NDC
Fax: 775.684.3399
Email: deferredcomp@defcomp.nv.gov

Voya Financial® 1.866.464.6832

EXHIBIT

For Payroll DATED 6-16-17



Payroll Contribution Form

912

Name GARY D. HAMES Employee ID# _____

Agency STOREY COUNTY Daytime Phone (775) 742-9826

☒ **Change Paycheck Deduction**
Increase, Decrease, Discontinue

☐ **New Paycheck Deduction **STOP HERE!****
**You must complete an EZ Enrollment form OR
Enroll Online with Voya Financial® to set up an account.

Please initial here if you enrolled online _____

EMPLOYER: ☐ State of Nevada ☐ NV System of Higher Education (NSHE) ☒ Political Subdivision
(City, County, Non-State)

PAYCHECK DEDUCTION AMOUNT:

I authorize my Employer to deduct the following amount(s) per pay period (minimum \$12.50 per pay period)
from my salary to NDC: * NOTE: For Budget

VOYA
FINANCIAL

Pre-Tax (Regular) \$ 20,086.79 Post-Tax (Roth) \$ _____

If you wish to cancel/suspend current payroll deduction, please indicate \$0. This form will supersede any previous form(s) on file.

CHECK BOX IF APPLICABLE*:

☐ **Age 50+ Catch-Up:** Date of Birth ____/____/____
You must reach age 50 by the end of the calendar year you are electing to use this catch-up provision.

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*Please note that you cannot use both the Age 50+ and the Special Catch-up provision at the same time. You need to choose the option most beneficial to you.

EFFECTIVE DATE:

This agreement will be effective the first payroll period of the month following the date this form is received and processed by the payroll department.

Signature [Signature] Date 6/13/2017

Please send the completed form to NDC
Fax: 775.684.3399
Email: deferredcomp@defcomp.nv.gov

Voya Financial® 1.866.464.6832

EXHIBIT

D-1

APPROVED: [Signature]

13 JUNE 2017



Public Employees' Retirement System of Nevada
693 W. Nye Lane, Carson City, NV 89703 (775) 687-4200 Fax (775) 687-5131
5740 S. Eastern Ave. Suite 120, Las Vegas, NV 89119 (702) 486-3900 Fax (702) 678-6934
Toll Free 1-866-473-7768 Website: www.nvpers.org Email: nvpers@nvpers.org

Purchase of Service Agreement

SECTION I - General Terms and Conditions

This Agreement is entered into on May 19, 2017, between Storey County, Employer # 320, hereinafter referred to as "Agency", and the Public Employees' Retirement System of Nevada, hereinafter referred to as "PERS", on behalf of Gary D Hames, SSN# [REDACTED] hereinafter referred to as "Member".

This purchase is for 0 years, 8 months, and 14 days of additional Police/Fire service for Member.

Total Due Date: July 18, 2017
Identification #: 3

Amount of Principal \$45,534.73

Total Amount Due by lump-sum payment \$45,534.73

SECTION II - Allocation of Payments

Upon completion of this Agreement, one hundred percent (100%) of the Agency's payment will be credited to Member's employer contribution account. Employer contributions are not refundable to Member upon termination of membership in PERS.

APPROVES *[Signature]*
13 JUNE 2017

EXHIBIT

D-2



STOREY COUNTY EARLY RETIREMENT INCENTIVE PROGRAM APPLICATION

NAME: _____

CURRENT JOB CLASS: Senior Administrative Specialist
DEPARTMENT: Commissioner Office

I hereby apply for early retirement program benefits. By my initials in the blocks below, I agree to the terms and conditions of program participation:

My application for early retirement program benefits must be submitted by June 1, 2012.

If accepted into the program, I must retire from Storey County employment no later than June 30, 2012.

By accepting the benefits of this program, I waive all rights to apply for or be considered for Storey County employment in any job class in which I have previously worked.

If accepted in the program, my date of retirement will be June 28, 2012.

By signing below, I am accepting the purchase of two (2) years of retirement and I'm electing to receive a one-time cash payment of \$ _____

Signature _____ Date _____

NOTICE OF DETERMINATION

Your application for benefits under the Early Retirement Incentive Program has been

☒ Accepted

☐ Denied

By _____ Date _____
Personnel Director

By _____ Date _____
County Manager

ACCEPTANCE OF DETERMINATION

I, _____ hereby confirm my application for benefits under the Early Retirement Incentive Program and my acceptance of the terms and conditions which I have initialed above. I will retire from Storey County on the date stated in my application.

Signature _____ Date _____

EXHIBIT

E

PAY REQUEST

Department: x

Employee:

Employee No.: _____

Title:

Grade:

Step:

Dollar Amount:

Hours:

Effective Date:

Account No.:

EEO: _____

This ☐ DOESN'T change the above employee's anniversary date to the effective date.
☐ DOES change the above employee's anniversary date to: _____

JUSTIFICATION: Reclass payroll expense to new Fund per 2014-15 Budget.

APPROVED

DENIED

Signed this _____ day of _____, 2014

Austin Osborne
Administrative Officer

☐ dtd _____ Emailed to PR

PAYROLL

_____ New Hire _____ Raise

_____ Longevity Updated

_____ Fire AL/SK _____ Fire Holiday

_____ Retro Pay To be paid on: _____ Amount: _____

_____ Update Excel Worksheet

_____ Update AS400

BiWeekly: _____

_____ AFSCME Dues

Hourly: _____

OT: _____

PERS Month _____

Misc: _____

Ready to file _____

_____ dtd _____ PR Entered

EXHIBIT

F



Storey County Board of Fire Commissioners

Agenda Action Report

Meeting date: December 5, 2017

Estimate of time required: 20 min.

Agenda: Consent ☐ Regular agenda ☒ Public hearing required ☐

1. **Title:** Discussion and possible action. Review of monetary payments, described as buyouts, to fire chief in December 2016, and June 2017 by the County Manager. The Board may take action, including but not limited to, determining whether the county manager had authority to make the payments, referring the matter to an outside agency for evaluation for violation of NRS, or determine whether to try to recover part or all of the payments.

2. **Recommended motion:** The Board should decide on a course of action of how to deal with these payments and make any appropriate motions.

3. **Prepared by:** Hugh Gallagher.

Department: Comptroller

Tel: 847-1006

4. **Staff summary:** The Board is faced with a decision about how it wants to deal with the payments made by the County Manager to the fire chief within the last year. The payments are detailed in the attached exhibit.

A. There are no written materials in relation to the agreement provided by the County Manager for these payments.

B. The Board should decide if it wants to review the County Manager's actions in making these payments and for not informing the Board.

5. **Supporting materials:** Comptroller report and exhibits. * See item 21.

6. **Fiscal impact:** A budget augmentation to cover these payments has been approved. Further fiscal impacts depends on the Board decides to do.

7. **Legal review required:** Yes _____ District Attorney

8. **Reviewed by:**

_____ Department Head

Department Name: Commissioner's Office

_____ County Manager

Other agency review: _____

9. **Board action:**

☐ Approved

☐ Approved with Modifications

☐ Denied

☐ Continued

Agenda Item No. 23



Storey County Board of Fire Commissioners Agenda Action Report

Meeting date: 12/05/17

Estimate of time required: 15 min.

Agenda: Consent ☐ Regular agenda ☒ Public hearing required ☒

1. **Title:** Discussion/Possible Action: Approval of Memorandum of Understanding between the Storey County Fire Protection District (Employer) and the Storey County Firefighters' Association IAFF Local 4227 (Union) amending language in Article 1 Sections 1(a) and 1(b) of the 2017-2019 collective bargaining agreement pertaining to supervisory and non-supervisory bargaining units.
2. **Recommended motion.** Based on the recommendation by staff and a mediated agreement between the Employer and the Union with the Federal Mediation and Conciliation Services (FMCS), I [fire commissioner] motion to approve Memorandum of Understanding (MOU) between the Storey County Fire Protection District (Employer) and the Storey County Firefighters' Association IAFF Local 4227 (Union) by amending language in Article 1 Sections 1(a) and 1(b) of the 2017-2019 collective bargaining agreement pertaining to supervisory and non-supervisory bargaining units as shown the MOU enclosed herewith.
3. **Prepared by:** Austin Osborne

Department: Human Resources **Telephone:** 775.847.0968
4. **Staff summary:** On October 30, 2017, the Employer and the Union engaged in no-cost mediation with the Federal Mediation and Conciliation Services (FMCS) regarding a disagreement in the 2017-2019 collective bargaining agreement about supervisory and non-supervisory unit language. The memorandum of understanding shown in this request reflects the agreement between the parties, subject to approval by fire board.
5. **Supporting materials:** Enclosed FMCS mediated agreement between the Employer and the Union, subject to approval by the fire board.

6. **Fiscal impact:**

Funds Available: n/a Fund: n/a _____ Comptroller

7. **Legal review required:**

_____ District Attorney

8. **Reviewed by:**

____ @ _____ Department Head

Department Name: Commissioner's Office

____ County Manager

Other agency review: _____

9. **Board action:**

☐ Approved

☐ Approved with Modifications

☐ Denied

☐ Continued

Agenda Item No. 24

Enclosure A: FMCS Mediated Agreement and MOU Amending Text in the 2017-2019 CBA



STOREY COUNTY FIRE PROTECTION DISTRICT

145 North C Street
P.O. Box 603
Virginia City, NV 89440
(775) 847-0954 Phone • (775) 847-0987 Fax

October 30, 2017

Re: FMCS Mediated Agreement: Memorandum of Understanding to 2017-2019 CBA

The Storey County Fire Protection District (Employer) and the Storey County Firefighters' Association, IAFF Local 4227 (Union) engaged in mediation with the Federal Mediation and Conciliation Services (FMCS) on October 30, 2017, regarding the contents of Article 1 Recognition of the 2017-2019 Collective Bargaining Agreement (CBA). The parties hereby agree to the following terms as a Memorandum of Understanding (MOU) to the CBA, subject to approval by the Board of Storey County Fire Commissioners and in accordance with NRS 288.

- By November 7, 2017, at 5:00 p.m., the Union agrees to ratify in its entirety the 2017-2019 CBA as adopted by the Board of Storey County Fire Commissioners on August 15, 2017, and the Union's ratification will include Article 1 as adopted by the Board of Storey County Fire Commissioners on said date and as shown in Exhibit A attached hereto.
- At its December 5, 2017, meeting of the Board of Storey County Fire Commissioners, Fire District staff will present as an action item with recommendation for approval this MOU amending Article 1 as shown in Exhibit B attached hereto. If the Board fails to approve the MOU, Article 1, Sections 1(a) and 1(b) of the CBA remain open to further negotiations. No other part of Article 1, or any other part of the CBA, will remain open to further negotiations.
- Action by the Board of Storey County Fire Commissioners or Fire District staff will not affect any other part of the 2017-2019 CBA.
- This MOU will remain in effect for the remaining term of said CBA.

Enclosures: Exhibit A – Board approved CBA Article 1 from August 15, 2017
Exhibit B – CBA Article 1 as amended per this MOU

SIGNATORIES TO MEMORANDUM OF UNDERSTANDING

IN WITNESS WHEREOF, the Parties hereto have executed this Agreement:

Dated this day of, 2017

STOREY COUNTY FIRE
PROTECTION DISTRICT

Marshall McBride, Chairman

STOREY COUNTY FIRE FIGHTERS'
ASSOCIATION IAFF LOCAL 4227

Matt Dixon, President

Page 1 of 4

Jack McGuffey, Vice Chairman



Justin Grimm, Vice-President

Lance Gilman, Commissioner



Jeff Nevin, Fire Chief

Pat Whitten, County Manager



Austin Osborne, HR Director

APPROVED AS TO FORM:

Attest By:

Anne Langer, District Attorney

Vanessa Stephens, Storey County Clerk/Treasurer

Exhibit A – Board approved CBA Article 1 from August 15, 2017

ARTICLE 1: RECOGNITION

1. The Employer hereby recognizes the Union as the exclusive collective bargaining unit for all Employees in the Supervisory and Non-Supervisory bargaining unit engaged in fire prevention and suppression in the Storey County Fire Protection District (District). The bargaining unit, Storey County Fire Fighters' Association IAFF Local 4227, represents both the Supervisory and the Non-Supervisory bargaining units. This Agreement complies with NRS 288 by separating supervisory and non-supervisory employees into separate units as follows:
 - a. Bargaining Unit A (Non-Supervisory): Pursuant to the provisions of the Local Government Employee Management Relations Act, Statutes of Nevada, the District recognizes the Union as the exclusive bargaining agent for all non-supervisory District employees listed in Section 2 of this Article.
 - b. Bargaining Unit B (Supervisory): Pursuant to the provisions of the Local Government Employee Management Relations Act, Statutes of Nevada, the District recognizes the union as the exclusive bargaining agent for supervisory District employees listed in Section 2 this Article.
2. The following job class(es) shall be covered by this Agreement:
 - a. Senior Firefighter/AEMT – Non Supervisory Unit
 - b. Senior Firefighter/Paramedic – Non-Supervisory Unit
 - c. Fire Captain – Supervisory
3. In the event the Employer creates a new job classification that will be placed in either bargaining unit or amends the job requirements of an existing job classification within either bargaining unit, the Employer will notify the Union as to their intended action and allow Union input prior to adoption. Where the proposed changes or change impacts matters within the scope of mandatory bargaining as specified in NRS 288 and this Agreement, upon request from the bargaining agent, the Employer will enter into negotiations to the extent required by law or this Agreement.

Exhibit B – CBA Article 1 as amended per this MOU

ARTICLE 1: RECOGNITION

1. The Employer hereby recognizes the Union as the exclusive collective bargaining unit for all Employees in the Supervisory and Non-Supervisory bargaining unit engaged in fire prevention and suppression in the Storey County Fire Protection District (District). The bargaining unit, Storey County Fire Fighters' Association IAFF Local 4227, represents both the Supervisory and the Non-Supervisory bargaining units.
2. The following job class(es) shall be covered by this Agreement:
 - a. Senior Firefighter/AEMT – Non Supervisory Unit
 - b. Senior Firefighter/Paramedic – Non-Supervisory Unit
 - c. Fire Captain – Supervisory Unit
3. In the event the Employer creates a new job classification that will be placed in either bargaining unit or amends the job requirements of an existing job classification within either bargaining unit, the Employer will notify the Union as to their intended action and allow Union input prior to adoption. Where the proposed changes or change impacts matters within the scope of mandatory bargaining as specified in NRS 288 and this Agreement, upon request from the bargaining agent, the Employer will enter into negotiations to the extent required by law or this Agreement.