

**Board of Directors Meeting – AGENDA**  
**ROLLING HILLS COMMUNITY SERVICES DISTRICT**  
**Tuesday, August 20, 2019 - 7:00 p.m.**  
**Holiday Inn Express Meeting Room**  
**4360 Town Center Drive, El Dorado Hills, CA**

**1. Call to Order/Announcements**

Pledge of Allegiance; Roll Call

**2. Public Comment - Items Not on Agenda**

*At this time, members of the public may address the Board of Directors regarding any item within the subject matter jurisdiction of the Board, not set forth as an agenda item. No action may be taken on items raised during Public Comment as they are not on the agenda. Issues presented in Public comments may be referred to staff or scheduled on a future board agenda. Please limit your comments to three minutes or less. The public comment portion of the meeting will not exceed 15 minutes.*

*In addition, members of the public may address the Board of Directors regarding an agenda item after that item has been called but before the Board entertains its discussion of the item. Please limit your comments to three minutes or less.*

**3. Monthly Reports**

**a. General Manager Report**

**4. Consent Items**

- a.** Approve/file draft Minutes of July 16, 2019 regular meeting of the Board of Directors
- b.** Approval of monthly financial reports prepared by the El Dorado County Auditor Controller's office for the month ended July 31, 2019
- c.** Correspondence receive/file:
  - 1) Umpqua Bank monthly statements for July 2019
  - 2) Auditor-Controller transmittal of Quarter 2, 2019 Federal and State quarterly reports
  - 3) Auditor-Controller transmittal confirming 2019/20 Direct Charge Levy Assessment
  - 4) PGE Important Legal Notice – Deadline for filing of claims in bankruptcy proceedings; 10/21/19
  - 5) CSDA Administrative Salary & Benefits Survey for Special Districts

Consent Items Pulled for Discussion: \_\_\_\_\_

**5. Old Business**

- a. Folsom Heights Development Project – Emergency Vehicle Access at Prima Drive and Stonebriar** – Staff to provide updated information available on this issue (Discussion Item)  
*[Agenda Item Requested by Resident]*
- b. DMV Requirements for Processing Citations** – Update regarding discussion with DMV for issuance of Requestor Code and next steps to move forward with citation processing (Discussion/Possible Action Item)

- c. **Replacement of Springfield Meadows Street Light Lantern Replacement Project** – Staff to provide further update about delay since March approval of Project due to non-delivery by supplier of lights; consider authorization of additional funds in the amount of \$750 from approved budget to defray the cost for adding photo cells to the streetlights (Discussion/Possible Action Item)
- d. **Removal of Fallen Tree on Berkshire and Additional Tree on Bailey Drive** – Staff to present information about fallen trees and recommendation for removal; seeking authorization for expenditure of funds from approved budget of not to exceed \$2,350 to complete the work (Discussion/Possible Action Item)
- e. **Radar Speed Signs - Upgrades or Replacement** – Staff to present information about the condition of the two radar speed signs placed on Stonebriar Drive and options for upgrades or replacement; Consider authorization of expenditure of funds from approved budget to defray the cost for the project. Options include updating current sign technology at cost of \$995 each, plus shipping, or trade-in existing signs for new model TC600 net cost \$2,800 each, plus shipping at \$120 each. (Discussion/Possible Action Item)
- f. **Consideration of Possible Annexation of District into El Dorado Hills CSD, Update regarding Department of Transportation Zone of Benefit for Road Maintenance, and Status of Discussions with EDHCSD** - Staff to provide update (Discussion Item)

## 6. New Business

- a. **District's Weed Abatement Activities** – Staff to discuss District's weed abatement and fire prevention activities including District's compliance with the El Dorado Hills Fire Department Weed Abatement Program and follow-up activities; Consideration of alternatives for further work as may be needed this year including hiring services or volunteer project; possible authorization for expenditure of funds from approved budget in an amount not to exceed \$1,000 for purchase of equipment needed to carry out volunteer project (Discussion/Possible Action Item) [*Agenda Item Requested by Resident*]
- b. **Request from USA Stars Academy, non-profit organization, regarding Fundraising or Partnering Opportunities for Improvement of District's Soccer Field in Exchange for Academy's Use of Fields for Select Teams** – Staff to present information about inquiry received (Discussion/ Possible Action Item)

## 7. Adjournment

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The Board may take action on any of the items listed on this Agenda regardless of whether the matter appears on the Consent Calendar or is described as an action item, a report, a discussion item, or an information item.

**NOTICE TO THE DISABLED AND VISUALLY OR HEARING IMPAIRED:** In compliance with the Americans with Disabilities Act, Rolling Hills CSD will provide special assistance for disabled citizens. A request for disability related modification or accommodation, including auxiliary aids or services, may be made by a person with a disability who requires a modification or accommodation in order to participate in the public meeting by contacting the General Manager at (916) 235-8671 or GenMgr@RollingHillsCSD.org . Notification 48 hours prior to the meeting will enable the District to make reasonable arrangements to ensure accessibility to this meeting.

**ROLLING HILLS COMMUNITY SERVICES DISTRICT  
MINUTES OF JULY 16, 2019 MEETING OF THE BOARD OF DIRECTORS**

**1. Call to Order/Roll Call.**

The meeting of the Rolling Hills CSD held on July 16, 2019, was called to order at 7:03 p.m. by President Tim Halverson in the meeting room at Holiday Inn Express, 4360 Town Center Drive, El Dorado Hills, California. In addition to President Halverson, Directors Brenda Collette, Gordon Fawkes, Matt Sites, and Mark Magee, General Manager Chaney Hicks, and Board Clerk Linda Stone were present.

**2. Public Comment (Items not on the agenda).**

None.

**3. Monthly Reports**

a. General Manager Report. General Manager Chaney Hicks presented an oral and written report detailing district business, copy attached.

Some discussion was had about the turf in Stonebriar Park and the water pressure issues. It was noted that residents have not complained about the condition of the grass and continue to use it. Chaney also reported on the condition of the radar speed signs. That item will be placed on next month's agenda for discussion.

**4. Consent Items**

The Consent items consisting of the draft minutes of the June 18, 2019 meeting, monthly bank statement from Umpqua Bank for June 2019, notification from LAFCO regarding its 2019 special district election, notification from CSDA regarding its 2019 Board of Directors election, and Notice from the City of Folsom Planning Commission regarding Folsom Heights Subdivision Small-Lot Vesting Tentative Subdivision Map Extension with hearing date of July 17, 2019 at 6:30 in Folsom Council Chambers were considered. The Clerk pointed out the hearing on the Folsom Heights item is set for tomorrow, July 17th. Director Gordon Fawkes moved to approve the consent items and accept and file the items including the minor edits to the June 18 draft minutes; second by President Halverson; motion carried.

AYES: Halverson, Collette, Fawkes, Sites and Magee

NOES: None

ABSENT: None

ABSTAIN: None

**Old Business**

**5.a. DMV Requirements for Processing Citations.** President Halverson reported that a further look into the content of Aging Reports produced by the vendor shows that the reports show the owner of the property. The District was not aware that information was included in the Report as it is not information referenced by the District. This matter is being referred to the General Counsel.

**5.b. JPA Roadway Expansion Project.** President Halverson reported he and Chaney Hicks met with Dokken Engineering regarding the Southeast Connector Expansion Project to discuss the maps prepared for the project. The maps did not include the District's monuments. They also discussed the raised planter area at the entrance to Springfield Meadows. The project will not affect the existing sound wall running parallel to White Rock Road. They learned rubberized asphalt is intended for use. The District will be presented with a price for the area of land to be taken for the Project. Timing for the Project is driving by available funding. Preliminary maps were provided, which will be included with the Minutes for reference.

**5.c. Replacement of Springfield Meadows Street Light Lantern Replacement Project.** Chaney reported that the materials purchased for the project are being shipped from Mexico. The vendor, Able Electric, anticipates completing the work during the week of August 12.

**New Business**

**6.a. Removal of Fallen Tree on Berkshire.** Chaney briefed the Board about the fallen tree on Berkshire. In accordance with the District's purchasing policies, she has solicited bids for the work from three vendors. To date, she has received only one bid. Since the tree is not causing any safety issues, the Board directed that she continue to seek bids for the work. Upon satisfaction of the District's procurement policies, President Halverson made a motion to approve the expenditure of not-to-exceed \$995 from the approved budget to cut up the tree and remove it, exclusive of the rounds; second by Director Brenda Collette; motion carried.

AYES: Halverson, Collette, Fawkes, Sites and Magee

NOES: None

ABSENT: None

ABSTAIN: None

**6.b. Public Hearing – Regarding Adoption of Final Budget for Fiscal Year 2020.**

President Tim Halverson opened the public hearing for this item. He asked if there was any public comment. There being none, he closed the hearing. There being no further discussion, Director Tim Halverson moved for adoption of Resolution 19-03 approving and adopting the Final Budget as presented in the amount of \$229,900 for FY2020; second by Director Gordon Fawkes, motion carried.

AYES: Halverson, Collette, Fawkes, Sites and Magee

NOES: None

ABSENT: None

ABSTAIN: None

**7. Adjournment.** Upon motion by Director Fawkes and seconded by Director Mark Magee, the meeting was adjourned at 8:10 p.m.

Submitted by:

Linda Stone, Board Secretary

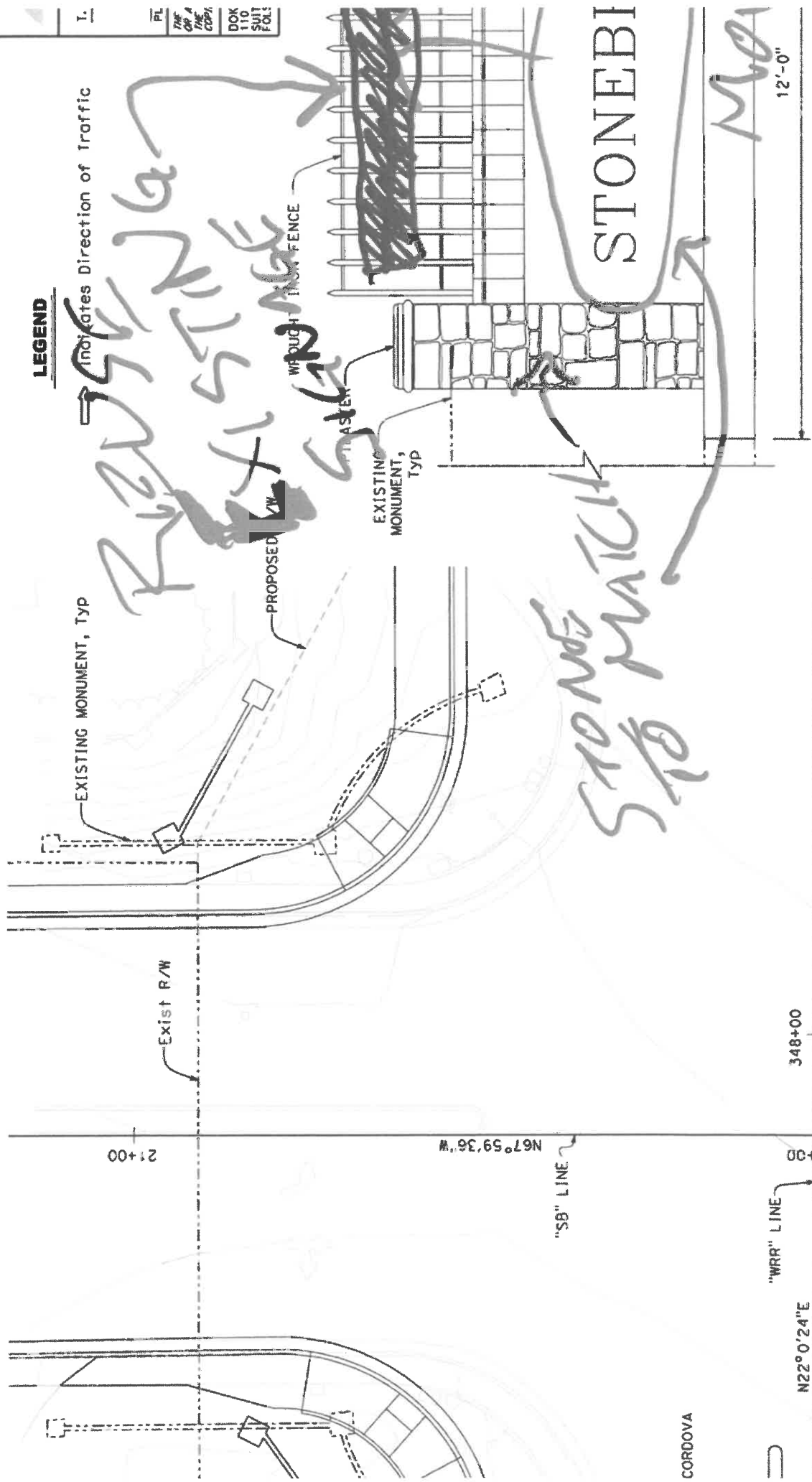
Approved by Board:

July 16, 2019

General Manager Report:

- Landscaping: Discussed issue/s with landscapers:
- Prepare Park for 4<sup>th</sup> Event
  - Park Turf Issues, Ongoing lack of water pressure due to too many heads on each station
- Annexation: Responded to EDHCSD regarding location of documents/financials and haven't heard back to date.
- Speed Signs: Two options for upgrading signs: Refurbish (takes two weeks) and costs \$995 each sign to upgrade technology. Or, trade in sign which we would be able to use existing solar unit and after trade in credit each sign (Model TC600) would net \$2800 each plus approx. \$120 each for shipping. New signs come with two part mounting bracket that includes a locking system.
- Direct Assessment: Appointment made for beginning of August to complete data download at County. (Due End of August)
- Berkshire Park Plan: Awaiting language from Board Member regarding language to include in submittal to County for approval of plans.
- Winterfield Drainage: Awaiting dry dirt before proceeding with procurement of plates. Ongoing.
- Resident Concerns: Call from new resident regarding what Rolling Hills CSD is responsible for. Tagged two trailers, 2 boats, one boat remaining (Stonebriar)

# PRELIMINARY-NOT FOR CONSTRUCTION



**PLAN**

1" = 10'

**MONUMENT SIGN DETAIL**

NO SCALE





**8028280 - 8028280 GENERAL FUND**Printed 8/12/2019  
9:21:46 AM**General Ledger****Summary for the Accounting Period Ended: July 31, 2019**

	Debit	Credit	Balance
<b>80280280 ROLLING HILLS</b>			
<b>ASSETS</b>			
100 EQUITY IN POOLED CASH	0.00	13,850.20	-13,850.20
ASSETS	0.00	13,850.20	-13,850.20
<b>LIABILITIES</b>			
201 VOUCHERS PAYABLE	13,850.20	12,389.57	1,460.63
LIABILITIES	13,850.20	12,389.57	1,460.63
<b>FUND BALANCE</b>			
431 EXPENDITURES	12,389.57	0.00	12,389.57
FUND BALANCE	12,389.57	0.00	12,389.57
80280280 ROLLING HILLS	26,239.77	26,239.77	0.00



**8028280 - 8028280 GENERAL FUND**Printed 8/12/2019  
9:21:48 AM**General Ledger****Details for the Accounting Period Ended: July 31, 2019**

	Debit	Credit	Balance
<b>80280280 ROLLING HILLS</b>			
<b>ASSETS</b>			
100 EQUITY IN POOLED CASH			
7/1/2019 BEGINNING BALANCE	0.00	0.00	0.00
7/2/2019 APP 202001 122	0.00	800.00	-800.00
7/23/2019 APP 202001 1292	0.00	1,460.63	-2,260.63
7/24/2019 APP 202001 1424	0.00	11,589.57	-13,850.20
100 EQUITY IN POOLED CASH	0.00	13,850.20	-13,850.20
ASSETS	0.00	13,850.20	-13,850.20
<b>LIABILITIES</b>			
201 VOUCHERS PAYABLE			
7/1/2019 BEGINNING BALANCE	0.00	0.00	0.00
7/1/2019 API 202001 121	0.00	800.00	-800.00
7/2/2019 APP 202001 122	800.00	0.00	0.00
7/23/2019 APP 202001 1292	1,460.63	0.00	1,460.63
7/24/2019 API 202001 1404	0.00	11,589.57	-10,128.94
7/24/2019 APP 202001 1424	11,589.57	0.00	1,460.63
201 VOUCHERS PAYABLE	13,850.20	12,389.57	1,460.63
LIABILITIES	13,850.20	12,389.57	1,460.63
<b>FUND BALANCE</b>			
431 EXPENDITURES			
7/1/2019 BEGINNING BALANCE	0.00	0.00	0.00
7/1/2019 API 202001 121	800.00	0.00	800.00
7/24/2019 API 202001 1404	11,589.57	0.00	12,389.57
431 EXPENDITURES	12,389.57	0.00	12,389.57
FUND BALANCE	12,389.57	0.00	12,389.57
80280280 ROLLING HILLS	26,239.77	26,239.77	0.00

**Revenues and  
Expenditures****8028280 CSD: ROLLING HILLS CSD**

Summary For the Month ended: July 31, 2019

	<b>Estimated / Budget</b>	<b>Actual Amount</b>	<b>Balance</b>
<b>8028280 CSD: ROLLING HILLS CSD</b>			
Expense			
40 Services & Supplies			
4100 INSURANCE: PREMIUM	0.00	3,778.84	-3,778.84
4185 MAINT: PARK	0.00	6,055.00	-6,055.00
4189 MAINT: WATER SYSTEM	0.00	225.00	-225.00
4240 MISC: EXPENSE	0.00	168.73	-168.73
4300 PROFESSIONAL & SPECIAL SRVS	0.00	837.00	-837.00
4345 SPECIAL DISTRICT DIRECTOR SRVS	0.00	375.00	-375.00
4420 RENT & LEASE: EQUIPMENT	0.00	800.00	-800.00
4440 RENT & LEASE: BUILD & IMPRV	0.00	150.00	-150.00
40 Services & Supplies	0.00	12,389.57	-12,389.57
Total Expense	0.00	12,389.57	-12,389.57
8028280 CSD: ROLLING HILLS CSD	0.00	-12,389.57	12,389.57
Report Total			
Total Expense	0.00	12,389.57	-12,389.57
	0.00	-12,389.57	12,389.57

**Revenues and  
Expenditures****8028280 CSD: ROLLING HILLS CSD**  
**Details For the Accounting Period ended: July 31, 2019**

	<b>Estimated / Budget</b>	<b>Actual Amount</b>	<b>Balance</b>
<b>8028280 CSD: ROLLING HILLS CSD</b>			
Expense			
40 Services & Supplies			
4100 INSURANCE: PREMIUM			
7/1/2019 BEGINNING BALANCE	0.00	0.00	
7/24/2019 API 325133 RHCSO property liability progr	0.00	3,778.84	
4100 INSURANCE: PREMIUM	0.00	3,778.84	-3,778.84
4185 MAINT: PARK			
7/1/2019 BEGINNING BALANCE	0.00	0.00	
7/24/2019 API 325130 RHCSO landscape services July	0.00	6,055.00	
4185 MAINT: PARK	0.00	6,055.00	-6,055.00
4189 MAINT: WATER SYSTEM			
7/1/2019 BEGINNING BALANCE	0.00	0.00	
7/24/2019 API 325131 RHCSO irrigation work July In	0.00	225.00	
4189 MAINT: WATER SYSTEM	0.00	225.00	-225.00
4240 MISC: EXPENSE			
7/1/2019 BEGINNING BALANCE	0.00	0.00	
7/24/2019 API 325132 RHCSO rental of portables for	0.00	168.73	
4240 MISC: EXPENSE	0.00	168.73	-168.73
4300 PROFESSIONAL & SPECIAL SRVS			
7/1/2019 BEGINNING BALANCE	0.00	0.00	
7/24/2019 API 325129 RHCSO Clerk services 7/1/19-7/	0.00	837.00	
4300 PROFESSIONAL & SPECIAL SRVS	0.00	837.00	-837.00
4345 SPECIAL DISTRICT DIRECTOR SRVS			
7/1/2019 BEGINNING BALANCE	0.00	0.00	
7/24/2019 API 325124 RHCSO director stipend 7-16-20	0.00	75.00	
7/24/2019 API 325125 RHCSO director stipend 7-16-20	0.00	75.00	
7/24/2019 API 325126 RHCSO director stipend 7-16-20	0.00	75.00	
7/24/2019 API 325127 RHCSO director stipend 7-16-20	0.00	75.00	
7/24/2019 API 325128 RHCSO director stipend 7-16-20	0.00	75.00	
4345 SPECIAL DISTRICT DIRECTOR SRVS	0.00	375.00	-375.00
4420 RENT & LEASE: EQUIPMENT			
7/1/2019 BEGINNING BALANCE	0.00	0.00	
7/1/2019 API 312346 RHCSO RENTALS FOR 4TH OF JULY	0.00	800.00	
4420 RENT & LEASE: EQUIPMENT	0.00	800.00	-800.00
4440 RENT & LEASE: BUILD & IMPRV			
7/1/2019 BEGINNING BALANCE	0.00	0.00	
7/24/2019 API 325123 RHCSO meeting room rental 7-1	0.00	150.00	
4440 RENT & LEASE: BUILD & IMPRV	0.00	150.00	-150.00
40 Services & Supplies	0.00	12,389.57	-12,389.57

**Revenues and  
Expenditures****8028280 CSD: ROLLING HILLS CSD**  
**Details For the Accounting Period ended: July 31, 2019**

	<b>Estimated / Budget</b>	<b>Actual Amount</b>	<b>Balance</b>
Total Expense	0.00	12,389.57	-12,389.57
8028280 CSD: ROLLING HILLS CSD	0.00	-12,389.57	12,389.57
Report Total			
Total Expense	0.00	12,389.57	-12,389.57
	0.00	-12,389.57	12,389.57

## CORRESPONDENCE

August 20, 2019 Materials



July 31, 2019 Page: 1 of 2

Customer Service:  
1-866-486-7782

ROLLING HILLS COMMUNITY SERVICES DIST  
CSD REVOLVING ACCOUNT  
PO BOX 5266  
EL DORADO HILLS CA 95762-0005

Last statement: June 30, 2019  
This statement: July 31, 2019

Save time and money on payroll with one of our full-service options. Business Online Payroll (R) is a cost-effective, online payroll solution with complete tax pay and file service. Paychex (R) is a full-service option which includes expert, one-on-one service. Visit our website to learn more about payroll services available through Umpqua Bank.

## PUBLIC FUNDS CHECKING

Account number	4866853585	Beginning balance	\$1,293.94
Low balance	\$1,117.09	Deposits/Additions	\$0.00
Average balance	\$1,219.78	Withdrawals/Subtractions	\$189.35
Interest earned	\$0.00	Ending balance	\$1,104.59

## Card Transactions/Withdrawals

<u>Date</u>	<u>Description</u>	<u>Subtractions</u>
07-19	POS Purchase Terminal 00010001 Istorage-el Dorado Hil 916-93399 CA XXXXXXXXXXXX1272	176.85
<b>Total Card Transactions/Withdrawals</b>		<b>\$176.85</b>

## Other Withdrawals/Subtractions

<u>Date</u>	<u>Description</u>	<u>Subtractions</u>
07-31	Service Charge For Maintenance Fee	12.50
<b>Total Other Withdrawals/Subtractions</b>		<b>\$12.50</b>

## IN CASE OF ERRORS OR QUESTIONS ABOUT YOUR ELECTRONIC TRANSFERS

Call us at 1-866-486-7782 or write us at Umpqua Bank, P.O. Box 19243, Spokane, WA 99219, as soon as you can if you think your statement or receipt is wrong or if you need more information about a transfer on the statement or receipt. We must hear from you no later than 60 days after we send you the FIRST statement on which the error or problem appears.

- (1) Tell us your name and account number (if any).
- (2) Describe the error or the transfer you are unsure about, and explain as clearly as you can why you believe there is an error or why you need more information.
- (3) Tell us the dollar amount of the suspected error.

If you tell us orally, we may require that you send us your complaint or question in writing within 10 business days.

We will determine whether an error occurred within 10 business days after we hear from you and will correct any error promptly. If we need more time, however, we may take up to 45 days to investigate your complaint or question. If we decide to do this, we will credit your account within 10 business days for the amount you think is in error, so that you will have the use of the money during the time it takes us to complete our investigation. If we ask you to put your complaint or question in writing and we do not receive it within 10 business days, we may not credit your account.

For errors involving new accounts, point-of-sale, or foreign-initiated transactions, we may take up to 90 days to investigate your complaint or question. For new accounts, we may take up to 20 business days to credit your account for the amount you think is in error.

We will tell you the results within three business days after completing our investigation. If we decide that there was no error, we will send you a written explanation.

You may ask for copies of the documents that we used in our investigation.



***County of El Dorado***  
**OFFICE OF AUDITOR-CONTROLLER**

360 FAIR LANE  
PLACERVILLE, CALIFORNIA 95667-4193  
Phone: (530) 621-5487 Fax: (530) 295-2535

**JOE HARN, CPA**  
Auditor-Controller

**BOB TOSCANO**  
Assistant Auditor-Controller

*July 31, 2019*

*RE: Quarter 2, 2019 Reports*

To whom it may concern,

Enclosed are copies of the Federal and State quarterly reports that were filed on behalf of the District.

Please retain these copies as they are often needed for audits, Worker's Compensation reporting, or as otherwise required.

Please contact me if you have any questions, thank you.

Sincerely,

A handwritten signature in black ink, appearing to be "Tim Moore", with a stylized flourish at the end.

Tim Moore  
County of El Dorado  
Office of Auditor/Controller-  
Payroll Division  
530-621-5485



## Linda Stone

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**From:** csd clerk <csdclerk@gmail.com>  
**Sent:** Wednesday, August 14, 2019 6:39 PM  
**To:** Linda Stone  
**Subject:** Fwd: Quarter 2 2019 Reports  
**Attachments:** doc04689820190731120320.pdf

----- Forwarded message -----

**From:** Tim Moore <[tim.moore@edcgov.us](mailto:tim.moore@edcgov.us)>  
**Date:** Wed, Jul 31, 2019, 1:34 PM  
**Subject:** Quarter 2 2019 Reports  
**To:** OA 61 Rolling Hills CSD <[csdclerk@gmail.com](mailto:csdclerk@gmail.com)>

Tim Moore  
County of El Dorado  
Auditor-Controller/Payroll Division  
Direct 530.621.5485  
Fax 530.295.2564

WARNING: This email and any attachments may contain private, confidential, and privileged material for the sole use of the intended recipient. Any unauthorized review, copying, or distribution of this email (or any attachments) by other than the intended recipient is strictly prohibited. If you are not the intended recipient, please contact the sender immediately and permanently delete the original and any copies of this email and any attachments.

## 941 for 2019: Employer's QUARTERLY Federal Tax Return

Department of the Treasury — Internal Revenue Service

950117

OMB No. 1545-0029

Employer identification number (EIN)	4	1	-	2	2	0	8	0	8	1
Name (not your trade name)	ROLLING HILLS COMMUNITY SERVICES DISTRICT									
Trade name (if any)										
Address	360 FAIR LANE									
Number	Street				Suite or room number					
PLACERVILLE	CA				95667					
City	State				ZIP code					
Foreign country name	Foreign province/county				Foreign postal code					

Report for this Quarter of 2019  
(Check one.)

- ☐ 1: January, February, March
- ☒ 2: April, May, June
- ☐ 3: July, August, September
- ☐ 4: October, November, December

Go to [www.irs.gov/Form941](http://www.irs.gov/Form941) for instructions and the latest information.

Read the separate instructions before you complete Form 941. Type or print within the boxes.

## Part 1: Answer these questions for this quarter.

1	Number of employees who received wages, tips, or other compensation for the pay period including: Mar. 12 (Quarter 1), June 12 (Quarter 2), Sept. 12 (Quarter 3), or Dec. 12 (Quarter 4)	1	0																				
2	Wages, tips, and other compensation	2	0.00																				
3	Federal income tax withheld from wages, tips, and other compensation	3	0.00																				
4	If no wages, tips, and other compensation are subject to social security or Medicare tax	<input checked="" type="checkbox"/>	Check and go to line 6.																				
<table border="0"> <tr> <td></td> <td>Column 1</td> <td></td> <td>Column 2</td> </tr> <tr> <td>5a</td> <td>Taxable social security wages</td> <td>0.00 × 0.124 =</td> <td>0.00</td> </tr> <tr> <td>5b</td> <td>Taxable social security tips</td> <td> × 0.124 =</td> <td> </td> </tr> <tr> <td>5c</td> <td>Taxable Medicare wages &amp; tips</td> <td>0.00 × 0.029 =</td> <td>0.00</td> </tr> <tr> <td>5d</td> <td>Taxable wages &amp; tips subject to Additional Medicare Tax withholding</td> <td> × 0.009 =</td> <td> </td> </tr> </table>					Column 1		Column 2	5a	Taxable social security wages	0.00 × 0.124 =	0.00	5b	Taxable social security tips	× 0.124 =		5c	Taxable Medicare wages & tips	0.00 × 0.029 =	0.00	5d	Taxable wages & tips subject to Additional Medicare Tax withholding	× 0.009 =	
	Column 1		Column 2																				
5a	Taxable social security wages	0.00 × 0.124 =	0.00																				
5b	Taxable social security tips	× 0.124 =																					
5c	Taxable Medicare wages & tips	0.00 × 0.029 =	0.00																				
5d	Taxable wages & tips subject to Additional Medicare Tax withholding	× 0.009 =																					
5e	Add Column 2 from lines 5a, 5b, 5c, and 5d	5e	0.00																				
5f	Section 3121(q) Notice and Demand—Tax due on unreported tips (see instructions)	5f																					
6	Total taxes before adjustments. Add lines 3, 5e, and 5f	6	0.00																				
7	Current quarter's adjustment for fractions of cents	7	0.00																				
8	Current quarter's adjustment for sick pay	8																					
9	Current quarter's adjustments for tips and group-term life insurance	9																					
10	Total taxes after adjustments. Combine lines 6 through 9	10	0.00																				
11	Qualified small business payroll tax credit for increasing research activities. Attach Form 8974	11																					
12	Total taxes after adjustments and credits. Subtract line 11 from line 10	12	0.00																				
13	Total deposits for this quarter, including overpayment applied from a prior quarter and overpayments applied from Form 941-X, 941-X (PR), 944-X, or 944-X (SP) filed in the current quarter	13	0.00																				
14	Balance due. If line 12 is more than line 13, enter the difference and see instructions	14	0.00																				
15	Overpayment. If line 13 is more than line 12, enter the difference	0.00	Check one: <input type="checkbox"/> Apply to next return. <input type="checkbox"/> Send a refund.																				

▶ You MUST complete both pages of Form 941 and SIGN it.

Next ▶

For Privacy Act and Paperwork Reduction Act Notice, see the back of the Payment Voucher.

Cat. No. 17001Z

Form 941 (Rev. 1-2019)

Name (not your trade name)

Employer identification number (EIN)

ROLLING HILLS COMMUNITY SERVICES DISTRICT

41-2208081

**Part 2: Tell us about your deposit schedule and tax liability for this quarter.**

If you are unsure about whether you are a monthly schedule depositor or a semiweekly schedule depositor, see section 11 of Pub. 15.

- 16 Check one: ☒ Line 12 on this return is less than \$2,500 or line 12 on the return for the prior quarter was less than \$2,500, and you didn't incur a \$100,000 next-day deposit obligation during the current quarter. If line 12 for the prior quarter was less than \$2,500 but line 12 on this return is \$100,000 or more, you must provide a record of your federal tax liability. If you are a monthly schedule depositor, complete the deposit schedule below; if you are a semiweekly schedule depositor, attach Schedule B (Form 941). Go to Part 3.

- ☐ You were a monthly schedule depositor for the entire quarter. Enter your tax liability for each month and total liability for the quarter, then go to Part 3.

Tax liability: Month 1 Month 2 Month 3 Total liability for quarter 

Total must equal line 12.

- ☐ You were a semiweekly schedule depositor for any part of this quarter. Complete Schedule B (Form 941), Report of Tax Liability for Semiweekly Schedule Depositors, and attach it to Form 941.

**Part 3: Tell us about your business. If a question does NOT apply to your business, leave it blank.**

- 17 If your business has closed or you stopped paying wages . . . . . ☐ Check here, and enter the final date you paid wages  /  / .

- 18 If you are a seasonal employer and you don't have to file a return for every quarter of the year . . . ☐ Check here.

**Part 4: May we speak with your third-party designee?**

Do you want to allow an employee, a paid tax preparer, or another person to discuss this return with the IRS? See the instructions for details.

- ☐ Yes. Designee's name and phone number

Select a 5-digit Personal Identification Number (PIN) to use when talking to the IRS.

- ☒ No.

**Part 5: Sign here. You MUST complete both pages of Form 941 and SIGN it.**

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Sign your name here

Print your name here

Tim Moore

Print your title here

Accounting Division Manager

Date

7/15/19

Best daytime phone

(530) 621-5485

**Paid Preparer Use Only**Check if you are self-employed . . . ☐

Preparer's name

PTIN

Preparer's signature

Date

 /  / 

Firm's name (or yours if self-employed)

EIN

Address

Phone

City

State

ZIP code

8024



Account Number:

499-0918-7

ROLLING HILLS COMMUNITY SERVICES DISTRICT

Page: 1

**Quarterly Contribution Return and Report of Wages (DE 9)**

Quarter Ended: June 30, 2019

A. No Wages Paid This Quarter [ ]

B. Out of Business/No Employees [ ]

C. Total Subject Wages Paid This Quarter \$0.00

D. Unemployment Insurance (UI) (Total employee wages up to 7,000.00 per employee per calendar year)

UI Rate %		UI Taxable Wages		
3.40	x	\$0.00	=	\$0.00

E. Employment Training Tax (ETT)

ETT Rate %		ETT Taxable Wages		
0.10	x	\$0.00	=	\$0.00

F. State Disability Insurance (Total employee wages up to 118,371.00 per employee per calendar year)

SDI Rate %		SDI Taxable Wages		
1.00	x	\$0.00	=	\$0.00

G. California Personal Income Tax (PIT) Withheld \$0.00

H. Subtotal \$0.00

I. Less: (Contributions and Withholdings Paid for the Year)  
(DO NOT Include Penalty and Interest Payments) \$0.00

J. Total Taxes Due or Overpaid (Item H minus Item I) \$0.00

9028



Account Number: 499-0918-7

ROLLING HILLS COMMUNITY SERVICES DISTRICT

**Quarterly Contribution Return and Report of Wages (Continuation) (DE 9C)**

Quarter Ended: June 30, 2019

A. Employees full-time and part-time who worked during or received pay subject to UI for the payroll period which includes the 12th of the month.

- ☐ B. Reporting Voluntary DI wages  
☐ C. No Payroll  
☐ D. Out of Business

<u>1st Month</u>	<u>2nd Month</u>	<u>3rd Month</u>
0	0	0

<b>E. SSN</b>	<b>F. First Name</b>	<b>MI</b>	<b>Last Name</b>	<b>G. Total Subject Wages</b>	<b>H. Total PIT Wages</b>	<b>I. Total PIT Withheld</b>	<b>Wage Code</b>
<b>M. Grand Total Subject Wages</b>				<b>N. Grand Total PIT Wages</b>	<b>O. Grand Total PIT Withheld</b>		
<div style="border: 1px solid black; text-align: right; padding: 2px;">0.00</div>				<div style="border: 1px solid black; text-align: right; padding: 2px;">0.00</div>	<div style="border: 1px solid black; text-align: right; padding: 2px;">0.00</div>		

## Linda Stone

---

**From:** csd clerk <csdclerk@gmail.com>  
**Sent:** Wednesday, August 14, 2019 6:42 PM  
**To:** Linda Stone  
**Subject:** Fwd: Rolling Hills CSD Direct Charge 64801  
**Attachments:** 64801 - Rolling Hills CSD.pdf

----- Forwarded message -----

From: **Joy Shaw** <[joy.shaw@edcgov.us](mailto:joy.shaw@edcgov.us)>  
Date: Wed, Aug 14, 2019, 2:27 PM  
Subject: Rolling Hills CSD Direct Charge 64801  
To: Chaney Hicks <[rollinghillscsdgm@gmail.com](mailto:rollinghillscsdgm@gmail.com)>, Rolling Hills CSD <[csdclerk@gmail.com](mailto:csdclerk@gmail.com)>

Hi Chaney,

Success! Confirmation memo is attached.  
:)

~~~~~  
Joy Shaw  
Auditor-Controller/Property Tax Division  
County of El Dorado  
530/621-5473  
~~~~~

WARNING: This email and any attachments may contain private, confidential, and privileged material for the sole use of the intended recipient. Any unauthorized review, copying, or distribution of this email (or any attachments) by other than the intended recipient is strictly prohibited. If you are not the intended recipient, please contact the sender immediately and permanently delete the original and any copies of this email and any attachments.



# County of El Dorado

## OFFICE OF AUDITOR-CONTROLLER

360 FAIR LANE  
PLACERVILLE, CALIFORNIA 95667  
Phone: (530) 621-5487 FAX: (530) 295-2535

JOE HARN, CPA  
Auditor-Controller

BOB TOSCANO  
Assistant Auditor-Controller

Date: August 14, 2019  
To: Rolling Hills CSD  
Attn: Chaney Hicks, General Manager  
Via email @ gm@rollinghillscsd.org, csdclerk@gmail.com

From: Joy Shaw, Property Tax Division  
RE: 2019/20 Direct Charge Levy Enrollment Confirmation-Reject Memo  
For Direct Charge Tax Code 64801

The District's Annual Certification of Levy and Data Transmission form dated 8/09/2019  
has been received and processed with the following results.

☐ am  
☒ pm

- ☒ The submitted direct charge levies for the tax code processed successfully.
- ☒ The direct charge levies for the tax code will be enrolled on the 2019/20 secured tax roll. No further action is needed from the district unless the district determines additions/deletions/changes are needed, in which case the district may submit a new data upload file for the tax code (which includes all levies for the direct charge tax code to overwrite the levies previously uploaded for the tax code) by August 30.
- ☐ The direct charge levies will be enrolled on the 2019/20 unsecured tax roll.
- ☐ The data upload for the tax code was rejected in its entirety for one or more of the following reasons. At this time, \$0 and zero ANs are levied on the direct charge tax code. Any known errors are indicated below; however, additional errors could exist. To remedy, **submit a new/corrected data upload file (with all levies for the tax code, not just the rejected levies) along with a new Annual Certification of Levy and Data Submission form** for the tax code by August 30.
- ☐ Duplicated ANs on the data upload file for the same direct charge tax code.
- ☐ Invalid ANs. This may include invalid ANs for the current tax year which were valid last year.
- ☐ \$0 amount(s).
- ☐ Amount(s) not divisible into two equal installments (amount ending in odd cent).
- ☐ Total amount on the data upload file doesn't equal the total amount as shown on the *Annual Certification of Levy and Data Submission* form. This could be for a variety of reasons including duplicated ANs with the same amount.
- ☐ Invalid direct charge tax code.
- ☐ AN appears to be outside of district's boundary. Please contact the Auditor if it is inside.
- ☐ Total number of records on the data upload file doesn't equal the total number of records as shown on the *Annual Certification of Levy and Data Submission* form. This could be for a variety of reasons including duplicated ANs with the same amount.
- ☐ Record(s) in the wrong format. Possibilities include extra spaces/headers/footers/etc.
- ☐ Format not consistent throughout entire data upload file.
- ☐ Unreadable record(s).
- ☐ Other:

cc: direct charge tax code annual file



**Pacific Gas and  
Electric Company®**

### **IMPORTANT LEGAL NOTICE**

Dear PG&E Customer,

You have received this mailing because PG&E Corporation and Pacific Gas and Electric Company (collectively, "PG&E") have reached the next step in their Chapter 11 Cases: the setting of the "Bar Date." The Bar Date is the deadline by which any person or entity must file a Proof of Claim **if they believe money is owed to them by PG&E for the period prior to the January 29, 2019, Chapter 11 filing.** The U.S. Bankruptcy Court for the Northern District of California has set the Bar Date at **October 21, 2019 at 5:00 p.m. Prevailing Pacific Time.**

This deadline is important because, as part of the Chapter 11 process, PG&E must determine all amounts claimed to be owed to various creditors. The Bar Date and the procedures for filing Proofs of Claim apply to all claims against PG&E that arose before the filing date, January 29, 2019.

#### **What You Need to Know About the Bar Date**

1. **All PG&E customers are receiving this notice.** Receiving this notice does **not** mean that you have a claim or that PG&E or the Bankruptcy Court believes that you have a claim.
2. **Note that customers are not required to file Proofs of Claim for ordinary and customary refunds, overpayments, billing credits, deposits, or similar billing items.** Inquiries relating to these items should continue to be directed to PG&E's customer service center.
3. **If you do not believe you have a claim against PG&E, you do not need to do anything in response to this Notice or return a Proof of Claim Form.**
4. To the extent you believe that you have a claim that arose before January 29, 2019, or that you are otherwise owed money by PG&E from before the filing date that has not been paid (other than an amount referenced in paragraph 2 above), you **MUST** file a Proof of Claim by the **October 21, 2019 Bar Date**. If you fail to do so your claim may be barred and you may not receive any distribution.
5. **IF YOU BELIEVE YOU HAVE A CLAIM ARISING OUT OF OR IN ANY WAY RELATING TO THE NORTHERN CALIFORNIA FIRES<sup>1</sup> YOU MUST FILE THE APPLICABLE FIRE PROOF OF CLAIM FORM BY THE BAR DATE, WHICH CAN BE FOUND AT [WWW.PGECUSTOMERBARDATEINFO.COM](http://WWW.PGECUSTOMERBARDATEINFO.COM).**
6. If you have already submitted a claim to PG&E's claims agent, Prime Clerk, prior to receiving this notice, you do **not** need to file another Proof of Claim.

#### **How to File a Proof of Claim**

Enclosed is a Proof of Claim Form to be used for any claims other than for claims related to the Northern California Fires. As noted above, if you believe you have a claim arising out of or in any way relating to the Northern California Fires, you must file the applicable Fire Proof of Claim Form by the Bar Date. All Proof of Claim Forms (including Fire Proof of Claim Forms) must be filed so as to be received on or before **October 21, 2019 at 5:00 p.m. (Prevailing Pacific Time)** as follows:



<p><b>If by first class mail:</b></p> <p>PG&amp;E Corporation Claims Processing Center c/o Prime Clerk LLC Grand Central Station PO Box 4850 New York, NY 10163-4850</p> <p><b>If by overnight courier:</b></p> <p>PG&amp;E Corporation Claims Processing Center c/o Prime Clerk LLC 850 Third Avenue, Suite 412 Brooklyn, NY 11232</p>	<p><b>If by hand delivery:</b></p> <p>PG&amp;E Corporation Claims Processing Center c/o Prime Clerk LLC 850 Third Avenue, Suite 412 Brooklyn, NY 11232</p> <p style="text-align: center;">-or-</p> <p>One of following PG&amp;E locations (beginning July 15, 2019 through the Bar Date (October 21, 2019) during the hours of 8:30 a.m. – 5:00 p.m. Prevailing Pacific Time):</p> <p>(i) 350 Salem Street, Chico, CA 95928; (ii) 231 "D" Street, Marysville, CA 95901; (iii) 1567 Huntoon Street, Oroville, CA 95965; (iv) 3600 Meadow View Road, Redding, CA 96002; (v) 111 Stony Circle, Santa Rosa, CA 95401; or (vi) 1850 Soscol Ave. Ste 105, Napa, CA 94559.</p> <p><b>Photocopy machines will not be available at the Claim Service Centers; you must bring a photocopy of your claim if you wish to receive a date-stamped copy.</b></p>	<p><b>If electronically:</b></p> <p>Access the case website established by Prime Clerk, <a href="http://www.pgecustomerbardateinfo.com">www.pgecustomerbardateinfo.com</a>, click the "Submit a Claim" link and follow the instructions as described.</p>
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Any claimant that timely files a Proof of Claim and makes a good faith effort to complete a Proof of Claim Form as set forth in the Bar Date Order, shall be permitted to revise, amend, and/or supplement their applicable Proof of Claim Form to the extent permitted by applicable law until such time as their claim is allowed or disallowed by order of the Court. Proof of Claim Forms will be deemed filed only when actually received at the addresses listed above or electronically on or before the Bar Date. If you submit a Proof of Claim Form via the Electronic Filing System, you will receive an email confirmation generated by the Electronic Filing System with an image of your filed Proof of Claim Form. Proof of Claim forms may not be delivered by facsimile, telecopy, or electronic mail transmission (other than Proofs of Claim filed electronically through the Electronic Filing System on the Prime Clerk website).

#### **Future Notifications**

If you would like to receive further updates, you may register your email address for electronic notification of important case documents at the website maintained by Prime Clerk, at [www.pgecustomerbardateinfo.com](http://www.pgecustomerbardateinfo.com). If you require additional information regarding this notice, you may contact Prime Clerk at (844) 627-7787 (toll free) for U.S.-based parties; or +1 (347) 292-2703 for International parties or by e-mail at: [pgecustomerbardateinfo@primeclerk.com](mailto:pgecustomerbardateinfo@primeclerk.com). **Please note that Prime Clerk cannot provide legal advice, nor can it advise you as to whether you should file a Proof of Claim.**

#### **About the Chapter 11 Case**

*On January 29, 2019, PG&E Corporation and Pacific Gas and Electric Company each filed a petition under Chapter 11 of the Bankruptcy Code in the U. S. Bankruptcy Court for the Northern District of California. The Chapter 11 Cases are being jointly administered under the lead case In re PG&E Corporation and Pacific Gas and Electric Company, Case No. 19-30088 (DM). To find more information on PG&E's Chapter 11 Cases, please visit <http://www.pge.com/reorganization>.*

*Copies of all of the documents filed in the Chapter 11 Cases, including the Bar Date Order and the Proof of Claim Form, can be viewed and/or obtained from the Debtors' notice and claims agent, Prime Clerk, at <https://restructuring.primeclerk.com/pge>.*

# United States Bankruptcy Court, Northern District of California

Fill in this information to identify the case (Select only one Debtor per claim form):

- ☐ PG&E Corporation (19-30088)
- ☐ Pacific Gas and Electric Company (19-30089)

## Official Form 410

## Proof of Claim

04/16

Read the instructions before filling out this form. This form is for making a claim for payment in a bankruptcy case. Do not use this form to make a request for payment of an administrative expense. Make such a request according to 11 U.S.C. § 503.

Filers must leave out or redact information that is entitled to privacy on this form or on any attached documents. Attach redacted copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and security agreements. Do not send original documents; they may be destroyed after scanning. If the documents are not available, explain in an attachment.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.

Fill in all the information about the claim as of the date the case was filed. That date is on the notice of bankruptcy (Form 309) that you received.

Unless an exception in the Bar Date Order applies to you, you should not use this form to submit a claim that arises out of or relates to the fires that occurred in Northern California prior to January 29, 2019.

### Part 1: Identify the Claim

1. Who is the current creditor?	ROLLING HILLS CSD Name of the current creditor (the person or entity to be paid for this claim) Other names the creditor used with the debtor	
2. Has this claim been acquired from someone else?	<input type="checkbox"/> No <input type="checkbox"/> Yes. From whom?	
3. Where should notices and payments to the creditor be sent? Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)	Where should notices to the creditor be sent? ROLLING HILLS CSD PO BOX 5266 EL DORADO HILLS CA 95762-0005	Where should payments to the creditor be sent? (if different) Name Number Street City State ZIP Code Contact phone Contact email
4. Does this claim amend one already filed?	<input type="checkbox"/> No <input type="checkbox"/> Yes. Claim number on court claims registry (if known) Filed on MM / DD / YYYY	
5. Do you know if anyone else has filed a proof of claim for this claim?	<input type="checkbox"/> No <input type="checkbox"/> Yes. Who made the earlier filing?	



1930088CUST

**Part 2: Give Information About the Claim as of the Date the Case Was Filed**

6. Do you have any number you use to identify the debtor? ☐ No  
☐ Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor: \_\_\_\_\_

7. How much is the claim? \$ \_\_\_\_\_ Does this amount include interest or other charges?  
☐ No  
☐ Yes. Attach statement itemizing interest, fees, expenses, or other charges required by Bankruptcy Rule 3001(c)(2)(A).

8. What is the basis of the claim? Examples: Goods sold, money loaned, lease, services performed, personal injury or wrongful death, or credit card.  
Attach redacted copies of any documents supporting the claim required by Bankruptcy Rule 3001(c).  
Limit disclosing information that is entitled to privacy, such as health care information.

9. Is all or part of the claim secured? ☐ No  
☐ Yes. The claim is secured by a lien on property.

**Nature of property:**  
☐ Real estate. If the claim is secured by the debtor's principal residence, file a *Mortgage Proof of Claim Attachment* (Official Form 410-A) with this *Proof of Claim*.  
☐ Motor vehicle  
☐ Other. Describe: \_\_\_\_\_

**Basis for perfection:** \_\_\_\_\_  
Attach redacted copies of documents, if any, that show evidence of perfection of a security interest (for example, a mortgage, lien, certificate of title, financing statement, or other document that shows the lien has been filed or recorded.)

**Value of property:** \$ \_\_\_\_\_

**Amount of the claim that is secured:** \$ \_\_\_\_\_

**Amount of the claim that is unsecured:** \$ \_\_\_\_\_ (The sum of the secured and unsecured amounts should match the amount in line 7.)

**Amount necessary to cure any default as of the date of the petition:** \$ \_\_\_\_\_

**Annual Interest Rate** (when case was filed) \_\_\_\_\_ %  
☐ Fixed  
☐ Variable

10. Is this claim based on a lease? ☐ No  
☐ Yes. Amount necessary to cure any default as of the date of the petition. \$ \_\_\_\_\_

11. Is this claim subject to a right of setoff? ☐ No  
☐ Yes. Identify the property: \_\_\_\_\_

12. Is all or part of the claim entitled to priority under 11 U.S.C. § 507(a)?

☐ No

☐ Yes. Check one:

Amount entitled to priority

A claim may be partly priority and partly nonpriority. For example, in some categories, the law limits the amount entitled to priority.

☐ Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B).

\$ \_\_\_\_\_

☐ Up to \$2,850 of deposits toward purchase, lease, or rental of property or services for personal, family, or household use. 11 U.S.C. § 507(a)(7).

\$ \_\_\_\_\_

☐ Wages, salaries, or commissions (up to \$12,850) earned within 180 days before the bankruptcy petition is filed or the debtor's business ends, whichever is earlier. 11 U.S.C. § 507(a)(4).

\$ \_\_\_\_\_

☐ Taxes or penalties owed to governmental units. 11 U.S.C. § 507(a)(8).

\$ \_\_\_\_\_

☐ Contributions to an employee benefit plan. 11 U.S.C. § 507(a)(5).

\$ \_\_\_\_\_

☐ Other. Specify subsection of 11 U.S.C. § 507(a)( ) that applies.

\$ \_\_\_\_\_

\* Amounts are subject to adjustment on 4/01/19 and every 3 years after that for cases begun on or after the date of adjustment.

Part 3: Sign Below

The person completing this proof of claim must sign and date it. FRBP 9011(b).

If you file this claim electronically, FRBP 5005(a)(2) authorizes courts to establish local rules specifying what a signature is.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.

Check the appropriate box:

☐ I am the creditor.

☐ I am the creditor's attorney or authorized agent.

☐ I am the trustee, or the debtor, or their authorized agent. Bankruptcy Rule 3004.

☐ I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005.

I understand that an authorized signature on this *Proof of Claim* serves as an acknowledgment that when calculating the amount of the claim, the creditor gave the debtor credit for any payments received toward the debt.

I have examined the information in this *Proof of Claim* and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on date \_\_\_\_\_ (mm/dd/yyyy)

\_\_\_\_\_  
Signature

Print the name of the person who is completing and signing this claim:

Name

First name

Middle name

Last name

Title

Company

Identify the corporate servicer as the company if the authorized agent is a servicer.

Address

Number

Street

City

State

ZIP Code

Contact phone

Email

# Instructions for Proof of Claim

United States Bankruptcy Court

12/15

These instructions and definitions generally explain the law. In certain circumstances, such as bankruptcy cases that debtors do not file voluntarily, exceptions to these general rules may apply. You should consider obtaining the advice of an attorney, especially if you are unfamiliar with the bankruptcy process and privacy regulations.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157 and 3571.

## How to fill out this form

- Fill in all of the information about the claim as of January 29, 2019.
- Fill in the caption at the top of the form.
- If the claim has been acquired from someone else, then state the identity of the last party who owned the claim or was the holder of the claim and who transferred it to you before the initial claim was filed.
- Attach any supporting documents to this form. Attach redacted copies of any documents that show that the debt exists, a lien secures the debt, or both. (See the definition of *redaction* on the next page.)
- Also attach redacted copies of any documents that show perfection of any security interest or any assignments or transfers of the debt. In addition to the documents, a summary may be added. Federal Rule of Bankruptcy Procedure (called "Bankruptcy Rule") 3001(c) and (d).
- Do not attach original documents because attachments may be destroyed after scanning.
- If the claim is based on delivering health care goods or services, do not disclose confidential health care information. Leave out or redact confidential information both in the claim and in the attached documents.
- A Proof of Claim form and any attached documents must show only the last 4 digits of any social security number, individual's tax identification number, or financial account number, and only the year of any person's date of birth. See Bankruptcy Rule 9037.
- For a minor child, fill in only the child's initials and the full name of the child's parent or guardian. For example, write *A.B., a minor child (John Doe, parent)*. See Bankruptcy Rule 9037.

## Confirmation that the claim has been filed

To receive confirmation that the claim has been filed, either enclose a stamped self-addressed envelope and a copy of this form. You may view a list of filed claims in this case by visiting the Claims and Noticing Agent's website at <https://restructuring.primeclerk.com/pse>.

## Understand the terms used in this form

- Administrative expense:** Generally, an expense that arises after a bankruptcy case is filed in connection with operating, liquidating, or distributing the bankruptcy estate. 11 U.S.C. § 503.
- Claim:** A creditor's right to receive payment for a debt that the debtor owed on the date the debtor filed for bankruptcy. 11 U.S.C. § 101 (5). A claim may be secured or unsecured.
- Creditor:** A person, corporation, or other entity to whom a debtor owes a debt that was incurred on or before the date the debtor filed for bankruptcy. 11 U.S.C. § 101 (10).
- Debtor:** A person, corporation, or other entity who is in bankruptcy. Use the debtor's name and case number as shown in the bankruptcy notice you received. 11 U.S.C. § 101 (13).
- Evidence of perfection:** Evidence of perfection of a security interest may include documents showing that a security interest has been filed or recorded, such as a mortgage, lien, certificate of title, or financing statement.
- Information that is entitled to privacy:** A *Proof of Claim* form and any attached documents must show only the last 4 digits of any social security number, an individual's tax identification number, or a financial account number, only the initials of a minor's name, and only the year of any person's date of birth. If a claim is based on delivering health care goods or services, limit the disclosure of the goods or services to avoid embarrassment or disclosure of confidential health care information. You may later be required to give more information if the trustee or someone else in interest objects to the claim.
- Priority claim:** A claim within a category of unsecured claims that is entitled to priority under 11 U.S.C. § 507(a). These claims are paid from the available money or property in a bankruptcy case before other unsecured claims are paid. Common priority unsecured claims include alimony, child support, taxes, and certain unpaid wages.
- Proof of claim:** A form that shows the amount of debt the debtor owed to a creditor on the date of the bankruptcy filing. The form must be filed in the district where the case is pending.

## Redaction of information:

Masking, editing out, or deleting certain information to protect privacy. Filers must redact or leave out information entitled to *privacy* on the *Proof of Claim* form and any attached documents.

**Secured claim under 11 U.S.C. § 506(a):** A claim backed by a lien on particular property of the debtor. A claim is secured to the extent that a creditor has the right to be paid from the property before other creditors are paid. The amount of a secured claim usually cannot be more than the value of the particular property on which the creditor has a lien. Any amount owed to a creditor that is more than the value of the property normally may be an unsecured claim. But exceptions exist; for example, see 11 U.S.C. § 1322(b) and the final sentence of § 1325(a).

Examples of liens on property include a mortgage on real estate or a security interest in a car. A lien may be voluntarily granted by a debtor or may be obtained through a court proceeding. In some states, a court judgment may be a lien.

**Setoff:** Occurs when a creditor pays itself with money belonging to the debtor that it is holding, or by canceling a debt it owes to the debtor.

**Unsecured claim:** A claim that does not meet the requirements of a secured claim. A claim may be unsecured in part to the extent that the amount of the claim is more than the value of the property on which a creditor has a lien.

## Offers to purchase a claim

Certain entities purchase claims for an amount that is less than the face value of the claims. These entities may contact creditors offering to purchase their claims. Some written communications from these entities may easily be confused with official court documentation or communications from the debtor. These entities do not represent the bankruptcy court, the bankruptcy trustee, or the debtor. A creditor has no obligation to sell its claim. However, if a creditor decides to sell its claim, any transfer of that claim is subject to Bankruptcy Rule 3001(e), any provisions of the Bankruptcy Code (11 U.S.C. § 101 et seq.) that apply, and any orders of the bankruptcy court that apply.

## Please send completed Proof(s) of Claim to:

If by first class mail:  
PG&E Corporation Claims Processing Center  
c/o Prime Clerk LLC  
Grand Central Station, PO Box 4850  
New York, NY 10163-4850  
If by overnight courier or hand delivery:  
PG&E Corporation Claims Processing Center  
c/o Prime Clerk LLC  
850 Third Avenue, Suite 412  
Brooklyn, NY 11232

You may also hand deliver your completed Proof(s) of Claim to any of the following service center offices (beginning July 15, 2019 through the Bar Date (October 21, 2019) during the hours of 8:30 a.m. – 5:00 p.m. Prevailing Pacific Time):

Chico Service Center  
350 Salem Street  
Chico, CA 95928  
Marysville Service Center  
231 "D" Street  
Marysville, CA 95901  
Napa Service Center  
1850 Soscol Ave. Ste 105  
Napa, CA 94559  
Oroville Service Center  
1567 Huntoon Street  
Oroville, CA 95965  
Redding Service Center  
3600 Meadow View Road  
Redding, CA 96002  
Santa Rosa Service Center  
111 Stony Circle  
Santa Rosa, CA 95401  
Photocopy machines will not be available at the Claim Service Centers; you must bring a copy of your claim if you wish to receive a date-stamped confirmed copy.

Do not file these instructions with your form

PG&E Corporation  
c/o Prime Clerk LLC  
Grand Central Station, PO Box 4850  
New York, NY 10163-4850

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ROLLING HILLS CSD

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**IMPORTANT LEGAL NOTICE**

*This Notice was authorized by a federal court. Read it carefully. Your rights are at stake.*



**California Special  
Districts Association**  
*Districts Stronger Together*

## **Administrative Salary & Benefits Survey for Special Districts**

### **Your input is requested!**

The California Special Districts Association (CSDA) is conducting an Administrative Salary & Benefits Survey that will enable us to provide the most accurate, comprehensive, up-to-date look at salary, retirement, health benefits and more for key administrative positions.

It is important that we get the participation of the greatest possible number of special districts in order to have the most statistically significant survey results. Your completed and returned survey will help ensure that the information compiled will accurately reflect the salary and benefits being offered by California's special districts.

All eligible participants will receive a discount off the price of online access to the aggregated results and customized reports.

The survey will take 15 to 20 minutes to complete and your individual feedback will remain confidential. Please return the completed survey form to CSDA no later than Monday, August 19, 2019.

For your convenience, the survey is also available online. If you would prefer to complete this survey electronically, please visit [www.csda.net](http://www.csda.net) >Member Resources >Salary Survey.

**Thank you in advance for your participation!**



**California Special  
Districts Association**

*Districts Stronger Together*

Welcome to the California Special Districts Association (CSDA) Administrative Salary & Benefits Survey. Your participation is appreciated!

The survey typically takes 15 to 20 minutes to complete and is due by Monday, August 19, 2019. Please submit the completed survey via USPS, fax, or email to:

California Special Districts Association  
1112 I Street, Suite 200  
Sacramento, CA 95814  
Fax: 916.520.2470  
cassandras@csda.net

**Complete this survey online at [www.csda.net](http://www.csda.net) > Member Resources > Salary Survey and receive a promotional code for a \$125 discount when pre-ordering online access to CSDA Salary & Benefits Survey reports.**

Participants who return the completed survey via USPS, fax, or email will receive an exclusive promotional code for a **\$100 discount** when pre-ordering online access to CSDA Salary & Benefits Survey reports.

Your survey responses will remain confidential. Survey results and reports will be based on aggregate responses and not include any identifying information.

Your contact information will also remain confidential, although you may be contacted by CSDA staff if clarification is needed regarding your responses. Please provide your contact information below. The promotional code will be sent to you via email after your completed survey is received.

Name:
Title:
Agency:
Email:
Phone:

*Before returning your responses, please keep a copy for your records.*



## I. District Profile

Primary county in which the District is located:

- |                                    |                                   |                                  |                                       |                                  |
|------------------------------------|-----------------------------------|----------------------------------|---------------------------------------|----------------------------------|
| <input type="radio"/> Alameda      | <input type="radio"/> Humboldt    | <input type="radio"/> Mendocino  | <input type="radio"/> San Benito      | <input type="radio"/> Siskiyou   |
| <input type="radio"/> Alpine       | <input type="radio"/> Imperial    | <input type="radio"/> Merced     | <input type="radio"/> San Bernardino  | <input type="radio"/> Solano     |
| <input type="radio"/> Amador       | <input type="radio"/> Inyo        | <input type="radio"/> Modoc      | <input type="radio"/> San Diego       | <input type="radio"/> Sonoma     |
| <input type="radio"/> Butte        | <input type="radio"/> Kern        | <input type="radio"/> Mono       | <input type="radio"/> San Francisco   | <input type="radio"/> Stanislaus |
| <input type="radio"/> Calaveras    | <input type="radio"/> Kings       | <input type="radio"/> Monterey   | <input type="radio"/> San Joaquin     | <input type="radio"/> Sutter     |
| <input type="radio"/> Colusa       | <input type="radio"/> Lake        | <input type="radio"/> Napa       | <input type="radio"/> San Luis Obispo | <input type="radio"/> Tehama     |
| <input type="radio"/> Contra Costa | <input type="radio"/> Lassen      | <input type="radio"/> Nevada     | <input type="radio"/> San Mateo       | <input type="radio"/> Trinity    |
| <input type="radio"/> Del Norte    | <input type="radio"/> Los Angeles | <input type="radio"/> Orange     | <input type="radio"/> Santa Barbara   | <input type="radio"/> Tulare     |
| <input type="radio"/> El Dorado    | <input type="radio"/> Madera      | <input type="radio"/> Placer     | <input type="radio"/> Santa Clara     | <input type="radio"/> Tuolumne   |
| <input type="radio"/> Fresno       | <input type="radio"/> Marin       | <input type="radio"/> Plumas     | <input type="radio"/> Santa Cruz      | <input type="radio"/> Ventura    |
| <input type="radio"/> Glenn        | <input type="radio"/> Mariposa    | <input type="radio"/> Riverside  | <input type="radio"/> Shasta          | <input type="radio"/> Yolo       |
|                                    |                                   | <input type="radio"/> Sacramento | <input type="radio"/> Sierra          | <input type="radio"/> Yuba       |

District type:

- |  |   |   |
|--|---|---|
| <input type="radio"/> Air Quality Management | <input type="radio"/> Healthcare/Hospital       | <input type="radio"/> Recreation & Park     |
| <input type="radio"/> Airport                | <input type="radio"/> Irrigation                | <input type="radio"/> Reclamation           |
| <input type="radio"/> Community Services     | <input type="radio"/> Library                   | <input type="radio"/> Resource Conservation |
| <input type="radio"/> Cemetery               | <input type="radio"/> Memorial                  | <input type="radio"/> Sanitary/Sanitation   |
| <input type="radio"/> Fire Protection/Police | <input type="radio"/> Mosquito & Vector Control | <input type="radio"/> Transit               |
| <input type="radio"/> Flood Control/Levee    |   | <input type="radio"/> Utilities             |
| <input type="radio"/> Harbor/Port            | <input type="radio"/> Open Space                | <input type="radio"/> Waste Management      |
|  |   | <input type="radio"/> Water                 |

Other (please specify): \_\_\_\_\_

District size:

Approximate Population/Customers Served: \_\_\_\_\_

Number of Full-Time Equivalent (FTE) employees: \_\_\_\_\_

*One full-time equivalent (FTE) equals one individual who works 40 hours per week, two individuals who each work 20 hours per week, etc.*

Total Operating Revenue: \_\_\_\_\_

*Report the total operating revenue for your district as reported in your most recent audit. Operating revenue is defined as the district's total operating income/revenue, excluding one-time grants and pass-throughs.*

## II. Salary Data

This section of the survey requests salary information for the following positions:

- General Manager
- Assistant General Manager
- Fire/Police Chief
- Executive Assistant
- Office Assistant/Receptionist
- Administrative Assistant
- Board Secretary/Clerk
- Customer Service Representative
- Office Administrative Services Manager
- IT Manager/Specialist
- Controller/CFO/Finance Manager
- Accounting Clerk/Specialist
- Safety & Risk Manager/Officer
- Human Resources Manager
- Human Resources Specialist/Analyst
- Safety Coordinator
- Government Affairs Manager
- Public Information Officer
- Public Affairs Specialist/Professional
- Facilities Manager
- Engineering/District Engineer
- Water/Wastewater Operator Grades I, II, III
- Maintenance Worker
- Recreation Manager/Supervisor

**A brief description is provided for each position in this survey.** Please refer to position descriptions and place employees in the position that best describes their responsibilities that occupy the greatest percentage of their time. While all positions listed may not be present in your District, please complete all that apply!

- If there is no comparable position in your district, enter "NA" under the field for "Organization's Title for Position."
- Please report salary information for **Full-Time Equivalent (FTE)** employees only. One Full-Time Equivalent (FTE) equals one individual who works 40 hours per week, two individuals who each work 20 hours per week, etc.
- If position is hourly, please calculate pay as annual salary.
- If you have multiple employees in the same position, please enter the *average* salary and *average* years in current position.
- Please enter rounded, whole numbers without decimal points. Do not enter "\$" or "%" in your answer. Do not enter estimated ranges (e.g., "10 to 12").
- Do not include company paid employment taxes or fringe benefits in the amounts reported.
- Enter "1" under "Years in Current Position" if the employee has been in the position for less than one year.

**Administration/Support**

**General Manager:**

Serves as the Executive Officer of the district and for the Board of Directors; administers the district and has exclusive management and control of the operations and works of the district, subject to approval by the board of Directors; provides day-to-day leadership for the district; seeks to carry into effect the expressed policies of the Board of Directors, including planning the short, medium and long term work program for the district; and translates the goals and objectives of the Board to the community.

Organization’s Title for Position (or NA)	Annual Base Salary - Actual	Annual Base Salary - Min	Annual Base Salary - Max	Years in Current Position

**Assistant General Manager:**

Under the direction of the General Manager, plans, organizes and assists in the overall management and control of the district; supervises and provides direction to the district’s division/department managers; ensures that the goals, objectives and policies decided upon by the Board of Directors are implemented and tracks their progress; and performs other duties and special projects as assigned by the General Manager.

Organization’s Title for Position (or NA)	Annual Base Salary - Actual	Annual Base Salary - Min	Annual Base Salary - Max	Years in Current Position

**Fire/Police Chief:**

Plans, organizes, directs, and administers all operations of the fire department/police department including administration (public relations, management of budget, personnel, supplies, equipment, structures, and compliance/enforcement of regulations, laws, policies and procedures), investigations, hazardous material response, rescue, and other emergency services.

Organization’s Title for Position (or NA)	Annual Base Salary - Actual	Annual Base Salary - Min	Annual Base Salary - Max	Years in Current Position

**Executive Assistant:**

Serves as administrative assistant/secretary to the General Manager and/or upper-level management. Duties can include: composing correspondence and reports for the General Manager and Board; serving as a liaison between the General Manager and division/department managers; making travel arrangements, maintaining appointment schedules and calendars, and arranging meetings and conferences. Maintains high level of confidentiality.

Organization’s Title for Position (or NA)	Annual Base Salary - Actual	Annual Base Salary - Min	Annual Base Salary - Max	Years in Current Position

**Office Assistant/Receptionist:**

Performs routine office support duties, including answering phones and greeting walk-in customers, answering basic inquiries. Dispenses and receives documents; explains policies and procedures; directs callers or walk-in customers to the appropriate staff; receives and processes mail; maintains and/or updates a variety of records or logs; prepares miscellaneous documents which can include correspondence, purchase orders, etc.; enters and retrieves information manually or into/from a computer system; files documents.

Organization's Title for Position (or NA)	Annual Base Salary - Actual	Annual Base Salary - Min	Annual Base Salary - Max	Years in Current Position

**Administrative Assistant:**

Under supervision, performs a variety of secretarial, clerical, and administrative duties for upper level management and supporting staff; relieves staff of administrative detail such as word processing, filing, faxing and fielding phone calls; assists in carrying out administrative policies and procedures; performs related duties as required.

Organization's Title for Position (or NA)	Annual Base Salary - Actual	Annual Base Salary - Min	Annual Base Salary - Max	Years in Current Position

**Board Secretary/Clerk:**

Serves as administrative support to the Board of Directors. Prepares agenda and attends meetings; transcribes and edits minutes; prepares drafts of agenda items requiring action by the Board; and prepares correspondence and maintains files on official actions of the Board. Ensures records are maintained as required by law. Fulfills other duties as required to support the Board. Maintains high level of confidentiality.

Organization's Title for Position (or NA)	Annual Base Salary - Actual	Annual Base Salary - Min	Annual Base Salary - Max	Years in Current Position

**Customer Service Representative:**

Primary duties include listening to, understanding, and responding to inquiries from customers. Researches and resolves customer complaints via phone, email, mail, or in-person; assists with errors, account questions, placement of orders, and cancellations; provides detailed information regarding services available, fees, schedules, policies, and procedures; resolves billing/payment issues; suggests solutions to customer problems.

Organization's Title for Position (or NA)	Annual Base Salary - Actual	Annual Base Salary - Min	Annual Base Salary - Max	Years in Current Position

**Office/Administrative Services Manager:**

Plans and directs internal support services for organizational effectiveness and efficiency. Ensures internal office policies and procedures are implemented. Manages recordkeeping and filing systems, mail distribution, office supply inventory, phone systems and office equipment. May direct receptionist and other office support staff. Coordinates purchasing and administrative facilities management.

Organization's Title for Position (or NA)	Annual Base Salary - Actual	Annual Base Salary - Min	Annual Base Salary - Max	Years in Current Position

**Information Manager/Specialist:**

Provides information systems support and assistance to District users; acts as primary resource to District staff regarding software, hardware, networking and/or information or computer systems questions and problems; troubleshoots, analyzes and diagnoses specific software and hardware problems/inadequacies and resolves; provides technical assistance to departmental systems and users; coordinates implementation of software and hardware documentation; and orientates newly hired employees on the use of automated systems.

Organization's Title for Position (or NA)	Annual Base Salary - Actual	Annual Base Salary - Min	Annual Base Salary - Max	Years in Current Position

**Controller/CFO/Finance Manager:**

Directs and controls the District's financial, accounting, and treasury activities; prepares a wide variety of detailed and analytical accounting, statistical, and narrative reports necessary for fiscal review; provides management and the Board of Directors with expertise in the areas of fiscal planning and control, accounting, budgeting, and investing public funds; supervises the daily work activities within accounting/bookkeeping including accounts payable, accounts receivable, cash receipts, payroll, and general ledger; prepares monthly financial statements; reconciles accounts; prepares special reports and analyses as required.

Organization's Title for Position (or NA)	Annual Base Salary - Actual	Annual Base Salary - Min	Annual Base Salary - Max	Years in Current Position

**Accounting Clerk/Specialist:**

Under direction, processes payroll, including auditing payroll reports and reconciling payroll records; inputs journal entries to general ledger; processes accounts receivable and payable; prepares accounting reports as requested; prepares any necessary billings; and processes purchase requests and orders.

Organization's Title for Position (or NA)	Annual Base Salary - Actual	Annual Base Salary - Min	Annual Base Salary - Max	Years in Current Position

**Safety & Risk Manager/Officer:**

Directs district's safety programs, risk management and loss control functions, insurance or self-insurance programs, workers' compensation and claims administration. Responsible for ensuring environmental regulatory compliance.

Organization's Title for Position (or NA)	Annual Base Salary - Actual	Annual Base Salary - Min	Annual Base Salary - Max	Years in Current Position

**Human Resources Manager:**

Supervises and directs all phases of the District's personnel and employee relations program including: recruitment and selection; classification and salary administration; employee benefits and educational programs; human resources planning and policy development; and employee performance rating and orientation programs. Administers a system of employee service records and other personnel records. May also include management of District's risk management functions.

Organization's Title for Position (or NA)	Annual Base Salary - Actual	Annual Base Salary - Min	Annual Base Salary - Max	Years in Current Position

**Human Resources Specialist/Analyst:**

Under supervision, provides technical and administrative support functions related to payroll and benefits administration, recruitment, employee orientation and training, and recognition programs.

Organization's Title for Position (or NA)	Annual Base Salary - Actual	Annual Base Salary - Min	Annual Base Salary - Max	Years in Current Position

**Safety Coordinator:**

Under supervision, supports the administration of occupational safety and health programs. Assists in planning and conducting training, monitoring, recordkeeping, and other administrative technical duties.

Organization's Title for Position (or NA)	Annual Base Salary - Actual	Annual Base Salary - Min	Annual Base Salary - Max	Years in Current Position

**Government Affairs Manager:**

Responsible for the implementation of strategies to advance legislative issues; represents the district at meetings and hearings; prepares testimony for legislative activities. Develops and maintains positive contacts with state and regional governments and industry associations.

Organization's Title for Position (or NA)	Annual Base Salary - Actual	Annual Base Salary - Min	Annual Base Salary - Max	Years in Current Position

**Public Information Officer:**

Develops, organizes, and coordinates outreach activities, public education, community affairs, and publications; prepares, formats and coordinates news material and other information for distribution to the communications media, the general public, and District employees; directs the preparation of displays, speeches, brochures, publications and other public education materials including films, video and slide shows regarding District activities or facilities. May also include the implementation of strategies to advance legislative issues; represents the District at meetings and hearings; prepares testimony for legislative activities.

Organization's Title for Position (or NA)	Annual Base Salary - Actual	Annual Base Salary - Min	Annual Base Salary - Max	Years in Current Position

**Public Affairs Specialist/Professional:**

Under supervision, provides support in a variety of public outreach and community relations activities. Assists in development and distribution of educational and promotional materials, maintaining contact lists, coordinating special events, assisting in surveys.

Organization's Title for Position (or NA)	Annual Base Salary - Actual	Annual Base Salary - Min	Annual Base Salary - Max	Years in Current Position

**Facilities Manager:**

Oversees the business and operational activities of the district's facilities, including preventative maintenance scheduling, maintenance and security operations, coordination of repairs and improvements. Manage contracts related to building maintenance functions. Ensure compliance with building codes and safety regulations.

Organization's Title for Position (or NA)	Annual Base Salary - Actual	Annual Base Salary - Min	Annual Base Salary - Max	Years in Current Position

**Engineering Manager/District Engineer:**

Manages and provides direction for the District's engineering needs and serves as the professional engineering expert for the District. Organizes and directs engineering studies, reports, designs, and specifications; construction of additions and improvements to the District's infrastructure including operations, plant, system(s), and/or stations; assures that the District's capital improvements are made in a sound engineering and cost-effective manner; works with various engineering consultants and personnel and oversees their work; and supervises and performs a variety of duties relating to the drafting of detailed construction drawings and related maps and specifications used in planning, maintenance and construction.

Organization's Title for Position (or NA)	Annual Base Salary - Actual	Annual Base Salary - Min	Annual Base Salary - Max	Years in Current Position

**Water/Wastewater Operator Grades I, II, III:**

Performs technical duties in the operations and activities of a water treatment plant. Inspects, monitors and documents plant operations; operates and maintains associated equipment. Collects samples, performs tests and adjusts chemical flows to ensure water quality standards are maintained.

Organization's Title for Position (or NA)	Annual Base Salary - Actual	Annual Base Salary - Min	Annual Base Salary - Max	Years in Current Position

**Maintenance Supervisor:**

Oversees maintenance and repair of the district's facilities, properties, and mechanical equipment. Prioritizes work; coordinates and directs staff in installation, maintenance, repair, and construction activities. Responsible for checking job sites for potential hazards and ensuring compliance with safety regulations; participates in the development and implementation of policies and procedures. Inspects projects and contracted work to ensure compliance with plans and specifications.

Organization's Title for Position (or NA)	Annual Base Salary - Actual	Annual Base Salary - Min	Annual Base Salary - Max	Years in Current Position

**Maintenance Worker:**

Under supervision, performs maintenance, repair, and construction work for district facilities. Operates and maintains light construction equipment; assists in cleanup of work sites and proper disposal of hazardous materials; performs traffic control functions around work sites.

Organization's Title for Position (or NA)	Annual Base Salary - Actual	Annual Base Salary - Min	Annual Base Salary - Max	Years in Current Position



**Recreation Manager/Supervisor:**

Responsible for the administration of recreational activities and recreational facilities. Includes supervising recreational staff, scheduling staff and facilities, managing and promoting community programs. Oversees maintenance of recreational facilities and equipment, manages related budget.

Organization's Title for Position (or NA)	Annual Base Salary - Actual	Annual Base Salary - Min	Annual Base Salary - Max	Years in Current Position

**III. Benefits****Compensation Increases:**

What kind of salary increases are granted to staff? Please check all that apply.

- ☐ Merit based  
☐ Cost-of-Living  
☐ Length-of-Service/Step increases  
☐ Education  
☐ Other (please specify): \_\_\_\_\_  
☐ NA

**Healthcare:**

If your District provides a healthcare plan, please indicate what type(s). Please check all that apply.

- ☐ HSA/High Deductible  
☐ Health Maintenance Organization (HMO)  
☐ Preferred Provider Organization (PPO)  
☐ Point of Services (POS)  
☐ Other (please specify): \_\_\_\_\_  
☐ NA

Percentage of healthcare premium **paid by district** for employees: \_\_\_\_\_

Percentage of healthcare premium **paid by district** for dependents: \_\_\_\_\_

**Dental Insurance:**

Percentage of dental insurance premium **paid by district** for employees: \_\_\_\_\_

Percentage of dental insurance premium **paid by district** for dependents: \_\_\_\_\_

**Vision Insurance:**

Percentage of vision insurance premium **paid by district** for employees: \_\_\_\_\_

Percentage of vision insurance premium **paid by district** for dependents: \_\_\_\_\_

**Other Benefits:**

	Fully paid by District	Partially paid by District	Fully Paid by Employee	Is not provided
Life Insurance - Employee	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Life Insurance - Dependents	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Short Term Disability Insurance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Long Term Disability Insurance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**What additional benefits are provided by your District? Please check all that apply.**

- ☐ Education assistance (tuition reimbursement)
- ☐ Employee assistance (emotional wellness)
- ☐ Flexible spending account
- ☐ Cell phone/cell phone allowance
- ☐ Uniforms/uniform allowance
- ☐ Vehicle/vehicle allowance
- ☐ Health club membership
- ☐ Other (please specify): \_\_\_\_\_
- ☐ NA

**Do you offer alternative work schedules/work arrangements? Please check all that apply.**

- ☐ 9 days/80 hours schedule
- ☐ 4 days/10 hours schedule
- ☐ Other flexible schedule (please specify): \_\_\_\_\_
- ☐ Telecommuting
- ☐ NA

**Paid Time Off**

- ☐ PTO (combines employee leave, vacation and sick leave)
- ☐ Separate vacation and sick leave
- ☐ Other (please specify): \_\_\_\_\_

**If your District uses a PTO program (combined vacation and sick leave), please answer the following questions:**

Total PTO days earned annually for employees with 0-5 years of service: \_\_\_\_\_

Total PTO days earned annually for employees with 6-10 years of service: \_\_\_\_\_

Total PTO days earned annually for employees with over 10 years of service: \_\_\_\_\_

**Is compensation provided for unused PTO days at the end of the year?**

- ☐ Yes
- ☐ No

**If your District uses vacation and sick pay, please answer the following questions:**

Total vacation days earned annually for employees with 0-5 years of service: \_\_\_\_\_

Total vacation days earned annually for employees with 6-10 years of service: \_\_\_\_\_

Total vacation days earned annually for employees with over 10 years of service: \_\_\_\_\_

**Is compensation provided for unused vacation days at the end of the year?**

- ☐ Yes
- ☐ No

Total sick days earned annually for employees with 0-5 years of service: \_\_\_\_\_

Total sick days earned annually for employees with 6-10 years of service: \_\_\_\_\_

Total sick days earned annually for employees with over 10 years of service: \_\_\_\_\_

**Is compensation provided for unused sick days at the end of the year?**

- ☐ Yes
- ☐ No

**Other Paid Time Off**

Number of paid holidays: \_\_\_\_\_

*Indicate the number of paid holidays annually, including floating holidays.*

**Are there other types of time off paid by district? Please check all that apply.**

- ☐ Jury Duty
- ☐ Bereavement
- ☐ Maternity
- ☐ Paternity
- ☐ Family Leave
- ☐ Military
- ☐ Other
- ☐ NA

## Retirement Benefits

**What type of retirement plan does your District offer? Please check all that apply.**

- ☐ PERS Defined Benefit Plan
- ☐ Independent System Defined Benefit Plan
- ☐ 1937 Act Defined Benefit Plan
- ☐ 401(k)
- ☐ 457
- ☐ Other
- ☐ NA

**If you offer a PERS Defined Benefit Plan, please enter the PERS retirement plan formula for the latest tier prior to PEPRA (to January 1, 2013):**

- ☐ 2% at 55
- ☐ 2% at 60
- ☐ 2.5% at 55
- ☐ 2.7% at 55
- ☐ 3% at 60
- ☐ Other (please specify): \_\_\_\_\_

**Do you offer other post-employment benefits (OPEB) to retirees?**

- ☐ Yes
- ☐ No

**If you offer OPEB to retirees, are your OPEB benefits administered by PERS?**

- ☐ Yes
- ☐ No

August 20, 2019

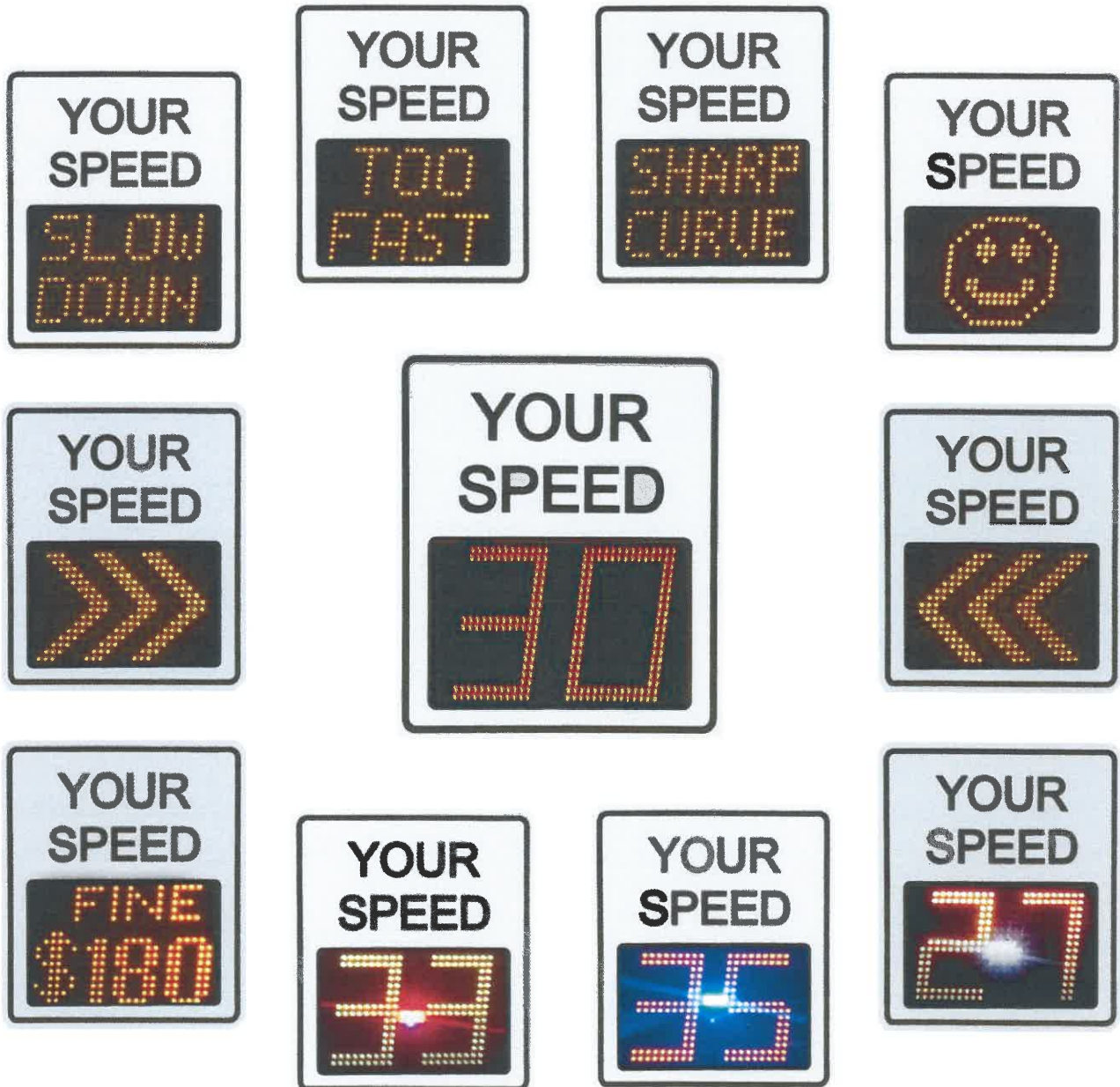
Meeting Materials

OLD BUSINESS. ITEM e. Radar Speed Signs – Upgrades or Replacement

One Sign...  
Multiple Applications



**TC-600 Full Matrix Radar Speed Sign**  
*The Traffic Calming POWER Tool*



Certified Quality System  
ISO 9001:2015



100% MUTCD Compliant  
Radar Speed Signs



Proudly Engineered &  
Manufactured in the USA

## Display and Radar Specifications

### YOUR SPEED Faceplate

- 28"W x 33"H YOUR SPEED faceplate with 4" high lettering
- MUTCD compliant colors and reflectivity
- Ideal for roads with traffic speeds of 5-70 mph
- Available in white, fluorescent yellow/green, safety orange, and yellow

### Speed Violator Alerts

- Standard alerts include:
  - Slow flash or fast flash of actual speed
  - SLOW DOWN message
  - TOO FAST message
- Optional alert choices:
  - SHARP CURVE
  - Chevrons (right or left facing)
  - Smiley face
  - Fine alert
  - Red/blue strobe (alternating)
  - Simulated camera flash and white strobe
- Display speed and word message alerts alternately or individually, based on speed settings



### Radar

- Type: K Band, single direction Doppler radar, FCC part 15 compliant; no license required
- Sensor Range: Detects vehicles up to 1200 feet
- Beam Width: 12 degrees, +/- 2 degrees
- Operating Frequency: 24.125 GHz, +/- 50 MHz
- Accuracy: +/- 1.0 mph
- Speed Detection Range: 5 - 127 mph

## Power Options / Battery Specifications

### TC-600S (Solar Powered)

- Solar Panel Output: 46 watt standard (25" x 19"), 65 watt optional (31" x 26.5")
- Power Supply: Two 12-volt, 18 amp/hour AGM batteries (UL recognized); provides up to 14 days of back-up operation on fully charged batteries
- Solar Charge Controller: Manages the flow of solar energy input (up to 85w from solar panel to battery)
- Low battery cut-off feature provides intelligent battery management
- Battery Status: Check battery charge levels and solar amperage via Wi-Fi
- Power Consumption: < 2.0 amps in active mode; Idle mode < 1/2 watt
- Circuit Breaker: Multi-circuit, 3x10 amp fuses
- Pole Mount Solar Bracket: Side of pole mount with adjustable angle bracket

### TC-600A (AC Powered)

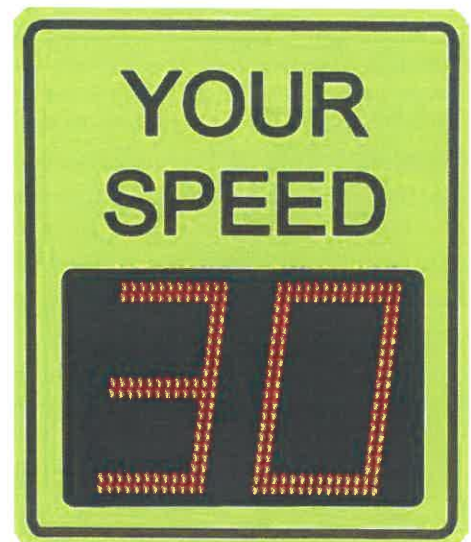
- Power Supply: Hard wire to 100V-240V power supply
- Power Consumption: < 2.0 amps in active mode; Idle mode < 1/2 watt
- Circuit Breaker: Multi-circuit, 10 amp fuse

### Weight

- TC-600S (Solar Powered): 41 lbs., (67 lbs. with batteries)
- TC-600A (AC Powered): 41 lbs.

### Operating Temperature

- Operating Temperature: -40°F to +160°F





## Housing Specifications

### Radar Speed Sign Housing

- Dimensions: 18.5"H x 26.25" W x 5.0"D
- Thickness: .1875" to .25" thick, heavy-duty aluminum
- NEMA 4 level compliant
- Humidity Maximum: 100%
- Non-sealed and ventilated
- Provides maximum protection from the elements and vandalism
- Single housing design means no separate battery box to mount

### Bashplate® with LED Cones

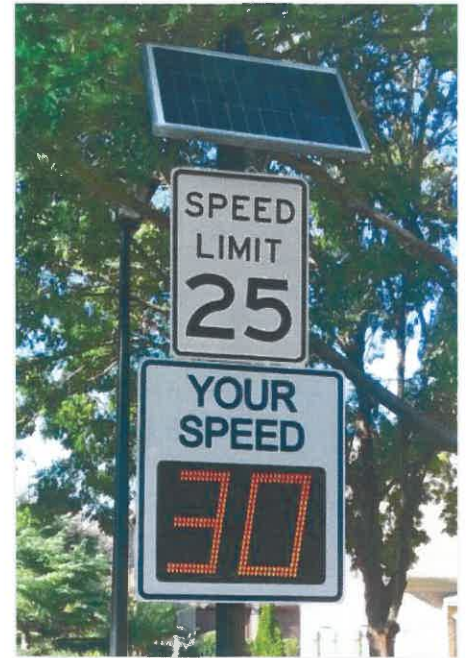
- Internal .375" aluminum shield over LED display to protect components from abuse or vandalism
- Directional beam technology: Individual holes for each LED focus and reflect light toward the road, providing the highest quality viewable display with minimum energy usage

### LEDs

- 2 digits, 13" high super bright amber full matrix LEDs (life up to 100,000 hours)
- Easily readable up to 600 feet
- Display brightness control: Automatic intensity adjustment to ambient light conditions for maximum visibility

### Polycarbonate Display Cover

- .25" thick protective sheet covers entire display area
- Abrasion, graffiti and shatter resistant; UV protection



## Standard Features

### Standard Programming

- Setup functions: Easy to follow menu, no mechanical switches to operate
- Daily timers: Allow 4 on/off timer settings per day, also by day of week. Settings allow lower speed limits for school zone times and for late night display shutoff. (Optional Advanced Scheduler available with all models)
- Stealth mode: Display on-off feature allows traffic data collection continue even when the display is off
- "Possum Switch" activation feature allows the sign to "play dead" for 30 minutes if attacked with force
- Maximum speed cutoff: Prevents unwanted high speed displays; up to 99 mph; discourages "racing" of sign. Choice of flashing matrix, or LED display cutoff.

### Wi-Fi Enabled

- Allows for quick and easy sign operation/data download from most web enabled devices
- WPA2 encrypted security; Password protection
- Connection range up to 300 feet from sign

### OTA Software Updates (over-the-air)

- Allows the wireless delivery of software updates and upgrades directly to the radar speed sign

## Traffic Data Reporting

### StreetSmart (optional)

- Traffic data reporting software to report, organize and analyze speed and traffic data. The information collected by the radar speed sign is loaded into Excel™ ready .csv files, and can generate 35 charts and graphs.

### Radar Speed Sign Data Storage:

- System Storage Capacity: stores data on up to 5 million vehicles. Retains data for retrieval for 12 months

## Warranty

- 2 year warranty on parts and labor, including batteries. Exceptions: Does not cover malicious abuse, theft, or damage due to unauthorized modification. Optional third year warranty extension available.



# Hyper-Alerts™

## Compact Flash Technology

Hyper-Alerts™ are compact clusters of LED lights built right into the "YOUR SPEED" faceplate of the TC-600 model, delivering a significantly more compact solution than traditional beacons. By clustering the LEDs into a smaller footprint, the same light from a typical flasher becomes an urgent notification for the driver.

### Application

Perfect for use in pedestrian-heavy environments such as school zones, business campuses, military bases and anywhere else there is an urgency to slow drivers.

### Raised Awareness

The LED clusters deliver the same luminescence as a 12" beacon, only in a more compact surface. This results in an "impossible to ignore alert" even 1000 feet from the sign.

### Cost Effective

Instead of having to choose between flashing beacons or a radar speed sign, now you can have both alerts for slightly more than the price of either one. The LED clusters are built right into the YOUR SPEED faceplate (30"W x 36"H"), resulting in a more compact system that is far easier to install. This upgrade offers a cost-effective solution to provide the maximum traffic calming effect on speeding drivers.

### Design

- Industrial construction with sleek design is in stark contrast to the individual, bulky, piece-meal look of traditional beacons
- Dual high-intensity amber LED clusters
- Meets ITE guidelines for brightness use in school zones
- LED luminosity: 3000 mcd minimum – 12000 mcd maximum
- 68 LEDs per alert, highly viewable at 1000 feet
- Flash patterns: MUTCD standard 60 fpm, Wig-Wag (alternating); Custom patterns available

### Scheduling Flexibility

- Programmable for an entire year in advance, by date and time, using our Advanced Scheduler
- Hyper-Alerts™ can be activated based on time of day, by speed, or by both

### Solar Power Output with Hyper-Alert™ Option

- 46 watt solar panel for maximum 4 hour daily operation
- 65 watt for maximum 10 hour daily operation
- 85 watt for 24/7 operation
- 120 watt for high volume traffic and cold temperatures

### Weight

- TC-600S with Hyper-Alerts™: 47 lbs., (73 w/ batteries)
- TC-600A (AC Powered) with Hyper-Alerts™: 47 lbs.

*The Hyper-Alert™ option is available on a new TC-600 sign, or as a retrofit of an existing sign; Existing sign must be returned to Radarsign for the retrofit.*

