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# Payroll Business Process

# PAYROLL BUSINESS PROCESS

## Part I

**FORM NAME:** EMPLOYER NEW HIRE / REHIRE FORM,  
COMPENSATION/JOB CLASS CHANGE FORM

### **PURPOSE OF PROCESS**

To progress through an approval process so that the appropriate information is provided to the Payroll Department so that a New Hire, Rehire, and Job and /or Salary change will be set up correctly in MUNIS and TLM.

### **PROCESS**

#### **1. Completion of form**

**Paperwork is due one week before the employee start date.**

##### **• Action**

Documents requirement for New Hires and Rehires

1. A completed Employer New Hire/Rehire Form
2. A completed Employee New Hire/Rehire Form
3. Federal Tax Form
4. State Tax Form
5. Proof of approval by PRC to fill vacancy
6. Supporting Pay Plan documentation.

Documents requirement for Compensation /Job Class Change Form

1. Proof of approval by PRC to fill vacancy
2. Supporting Pay Plan documentation.

The New Employer New Hire/Rehire Form and Employee New Hire/Rehire Form and the Compensation/Job Class Change Form provided should used effective immediately.

**Forward completed packets to Melody Rose in Payroll.**

#### **2. Approval Process**

##### **• Action**

1. A completed document packet is delivered to the Finance Department to be audited and reviewed by the Financial Analysts.
2. Once approved, the Job Class will be assigned a position number.
3. The paperwork will then be signed by the Budget Director and the Financial Analyst.
4. It will be returned to the Payroll Office to be entered into MUNIS.

**This process may take up to FORTY-EIGHT hours.**

#### **3. Data Entry**

##### **• Action**

1. Information is entered into MUNIS by payroll as pending within the same day approved by Finance.

2. Once entered, e-mails are sent to representatives in Human Resources and Finance to give final approval before the new master record is posted.

3. When, approved, the employee master record will be posted to MUNIS and TLM.

**This process may take up to FORTY-EIGHT hours.**

# PAYROLL BUSINESS PROCESS

## Part II

**NAME:** EMPLOYER NEW HIRE/REHIRE FORM

**DUE BY:** ONE WEEK BEFORE THE SCHEDULED START DATE OF THE NEW HIRE OR REHIRE EMPLOYEE.

### PURPOSE OF PROCESS

To provide the appropriate information to the Payroll Department so that a New Hire or Rehire will be set up correctly in MUNIS and TLM.

### PROCESS

For new Hires, Rehires, and Job Class Changes refer to the reports listed below:

- Report A: Job Class and Job Title Report
- Report B: Location Report
- Report C: Group Bargaining Unit (Union) Report
- Report D: Pay Plan
- Report E: Check Location Report
- Report F: TLM Reports (TLM Departments, TLM Person Types, TLM Pay Rules, TLM Accrual Profiles)

### COMPLETION OF FORM

#### • Action: New Hire/Rehire

1. New Hire or Rehire Status: Employee Number will be created within the MUNIS system. If possible please provide employee numbers for Rehires.
2. New Hires: Full Time and Part time (20 hours or over) permanent employees will enter the Retirement Plan. Temporary or seasonal employee will be enrolled into the OBRA Plan. Retirement status for Rehires will be determined by Payroll and the Retirement Office.
3. **Only** provide last four digits of the SSN number.
4. New Position, Backfill, and Incumbent's Name: Information required by Financial Analysts.

#### • Job / Salary

1. Job Class and Job Title: Report A
2. Location: Report B
3. Group Bargaining Unit/Union: Report C
4. Salary Plan/Grade/ Report D (should have on hand within each department)
5. General Fund/ Grant Fund: Required Field. Information required by Financial Analysts.
6. Start Date/ End Date: To be used primarily for temporary, seasonal and/or Grant positions. Required by the Finance Department.
7. Licenses: As required by position.
8. Check Location: Report E

#### • TLM Info

1. Report F

#### • Company Equipment

2. As required by position.

• **Approvals**

1. **All documents sent to Payroll should have original signatures.** Photocopies will not be accepted and will be sent back to the originating department.

2. New Hire / Rehire documentation should be audited before it sent to Payroll. Documentation that has a substantial amount of missing information will be sent back to the originating department.

3. **New Hires and Rehires must be received in the Payroll Office no later than one week before the employee is scheduled to start.** For paperwork sent in later than suggested seven day window; timely entry in MUNIS and TLM cannot be guaranteed.

Blank Employer New Hire/Rehire Form  
Completed sample by Report Name  
Completed sample as Employee



# EMPLOYER NEW HIRE / REHIRE FORM

This form must be completed by the employer/department for all new hires and forwarded to the Payroll Department accompanied by the Employee New Hire/Rehire form completed by the employee and all employee completed tax forms.

**Important: Failure to submit both forms and/or incomplete forms will be returned to the department. Incomplete or missing tax forms will result in the highest withholding from pay.**

<b>ACTION</b>	<input type="checkbox"/> New Hire <input type="checkbox"/> Rehire*                      Employee #: _____ * City Retiree <input type="checkbox"/> Y <input type="checkbox"/> N                      Employee Start Date: _____ OBRA <input type="checkbox"/> Y <input type="checkbox"/> N                      Last 4 Digits SSN: _____ Name: Last _____ First: _____ M.I. _____  <input type="checkbox"/> New Position <input type="checkbox"/> Backfill**    **Prior Incumbent's Name: _____
	Job Class #: <u>4905 (Report A)</u> Job Title: <u>Head Rec Leader (Report A)</u> Location: <u>CPW1 (Report B)</u> Grp Bargaining Unit/Union: <u>C01T (Report C)</u> Reports to: _____ Shift: _____ Standard Hrs: <u>20</u> <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time                      Civil Service: <input type="checkbox"/> Y <input type="checkbox"/> N Class: <input type="checkbox"/> Permanent <input type="checkbox"/> Temporary <input type="checkbox"/> Seasonal <input type="checkbox"/> Emergency <input type="checkbox"/> Provisional <input type="checkbox"/> Intermittent Employee Type: <input type="checkbox"/> Hourly/Non Exempt <input type="checkbox"/> Salaried/Exempt Salary Plan / Grade: _____ <input type="checkbox"/> General Fund <input type="checkbox"/> Grant Fund Org: _____ Obj: _____ Proj: _____ Start Date: _____ End Date: _____ Pay Rate:   Hourly: <u>\$ (Report D)</u> Weekly: <u>\$</u> Annual: <u>\$</u> Addl Licenses: <input type="checkbox"/> 725/726 CDL <input type="checkbox"/> 768/770 Pesticide <input type="checkbox"/> 727/728 Construction Check Location: <u>D192 (Report E)</u>
<b>JOB / SALARY</b>	TLM Dept: <u>C704 (Report F)</u> Person Type: <u>TC01 (Clock : Report F)</u> Pay Rule: <u>P155 (Report F)</u> Accrual Profile: <u>264 (Report F)</u> Badge #: <u>(Provided by Payroll)</u>
	Date Assigned: _____ Description of Items/Type: _____ _____ _____
<b>TLM INFO</b>	Manager Signature: _____ Date: _____ Manager Name (Print): _____ Finance – Financial Analyst: _____ Date: _____ CAFO: Timothy J. Plante _____ Date: _____ Budget Director – Jennifer Winkler _____ Date: _____





# EMPLOYER NEW HIRE / REHIRE FORM

This form must be completed by the employer/department for all new hires and forwarded to the Payroll Department accompanied by the Employee New Hire/Rehire form completed by the employee and all employee completed tax forms.

**Important: Failure to submit both forms and/or incomplete forms will be returned to the department. Incomplete or missing tax forms will result in the highest withholding from pay.**

<b>ACTION</b>	<input type="checkbox"/> New Hire <input type="checkbox"/> Rehire*	Employee #: _____
	* City Retiree <input type="checkbox"/> Y <input type="checkbox"/> N	Employee Start Date: _____
	OBRA <input type="checkbox"/> Y <input type="checkbox"/> N	Last 4 Digits SSN: _____
	Name: Last _____	First: _____ M.I. _____
	<input type="checkbox"/> New Position <input type="checkbox"/> Backfill**    **Prior Incumbent's Name: _____	

<b>JOB / SALARY</b>	Job Class #: _____	Job Title: _____	
	Location: _____	Grp Bargaining Unit/Union: _____	
	Reports to: _____	Shift: _____	Standard Hrs: _____
	<input type="checkbox"/> Full Time <input type="checkbox"/> Part Time	Civil Service: <input type="checkbox"/> Y <input type="checkbox"/> N	
	Class: <input type="checkbox"/> Permanent <input type="checkbox"/> Temporary <input type="checkbox"/> Seasonal		
	<input type="checkbox"/> Emergency <input type="checkbox"/> Provisional <input type="checkbox"/> Intermittent		
	Employee Type: <input type="checkbox"/> Hourly/Non Exempt <input type="checkbox"/> Salaried/Exempt		
	Salary Plan / Grade: _____		
	<input type="checkbox"/> General Fund <input type="checkbox"/> Grant Fund		
	Org: _____	Obj: _____	Proj: _____
Start Date: _____	End Date: _____		
Pay Rate:    Hourly:    \$ _____	Weekly:    \$ _____	Annual:    \$ _____	
Add Licenses: <input type="checkbox"/> 725/726 CDL <input type="checkbox"/> 768/770 Pesticide <input type="checkbox"/> 727/728 Construction			
Check Location: _____			

<b>TLM INFO</b>	TLM Dept: _____	Person Type: _____
	Pay Rule: _____	Accrual Profile: _____
	Badge #: _____	

<b>COMPANY EQUIPMENT</b>	Date Assigned: _____
	Description of Items/Type: _____ _____ _____

<b>APPROVALS</b>	Manager Signature: _____	Date: _____
	Manager Name (Print): _____	
	Finance – Financial Analyst: _____	Date: _____
	CAFO – TIMOTHY J PLANTE _____	Date: _____
	Budget Director – JENNIFER WINKLER _____	Date: _____



# EMPLOYER NEW HIRE / REHIRE FORM

This form must be completed by the employer/department for all new hires and forwarded to the Payroll Department accompanied by the Employee New Hire/Rehire form completed by the employee and all employee completed tax forms.

**Important: Failure to submit both forms and/or incomplete forms will be returned to the department. Incomplete or missing tax forms will result in the highest withholding from pay.**

<b>ACTION</b>	<input type="checkbox"/> New Hire <input type="checkbox"/> Rehire*                      Employee #: _____ * City Retiree <input type="checkbox"/> Y <input type="checkbox"/> N                      Employee Start Date: _____ OBRA <input type="checkbox"/> Y <input type="checkbox"/> N                      Last 4 Digits SSN: _____ Name: Last _____ First: _____ M.I. _____  <input type="checkbox"/> New Position <input type="checkbox"/> Backfill**    **Prior Incumbent's Name: _____
	Job Class #: _____ Job Title: _____ Location: _____ Grp Bargaining Unit/Union: _____ Reports to: _____ Shift: _____ Standard Hrs: _____ <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time                      Civil Service: <input type="checkbox"/> Y <input type="checkbox"/> N Class: <input type="checkbox"/> Permanent <input type="checkbox"/> Temporary <input type="checkbox"/> Seasonal <input type="checkbox"/> Emergency <input type="checkbox"/> Provisional <input type="checkbox"/> Intermittent Employee Type: <input type="checkbox"/> Hourly/Non Exempt <input type="checkbox"/> Salaried/Exempt Salary Plan / Grade: _____ <input type="checkbox"/> General Fund <input type="checkbox"/> Grant Fund Org: _____ Obj: _____ Proj: _____ Start Date: _____ End Date: _____ Pay Rate:   Hourly:   \$ _____   Weekly:   \$ _____   Annual:   \$ _____ Addl Licenses: <input type="checkbox"/> 725/726 CDL <input type="checkbox"/> 768/770 Pesticide <input type="checkbox"/> 727/728 Construction Check Location: _____
<b>TLM INFO</b>	TLM Dept: _____ Person Type: _____ Pay Rule: _____ Accrual Profile: _____ Badge #: _____
	Date Assigned: _____ Description of Items/Type: _____ _____ _____
<b>APPROVALS</b>	Manager Signature: _____ Date: _____ Manager Name (Print): _____ Finance – Financial Analyst: _____ Date: _____ CAFO – TIMOTHY J PLANTE _____ Date: _____ Budget Director – JENNIFER WINKLER _____ Date: _____

# Blank Employee New Hire/Rehire Form



# EMPLOYEE NEW HIRE / REHIRE FORM

This form must be completed by the employee upon hire and forwarded to the Payroll Department accompanied by the Employer New Hire/Rehire form completed by the department. Please include Federal and State tax forms.

**Important: Failure to submit both forms and/or incomplete forms will be returned to the department. Incomplete or missing tax forms will result in the highest withholding from employee's pay.**

<b>PERSONAL INFORMATION</b>	Today's Date: _____
	Name: Last: _____ First: _____ M.I. _____
	Last 4 Digits SSN: _____
	Home Street Address: _____ _____
	City: _____ State: _____ Zip Code: _____
	Home Phone: _____ Alternate Phone: _____
	Date of Birth: _____

<b>EMERGENCY CONTACT</b>	Emergency Contact Name: _____
	Relation: _____
	Contact Phone Number: _____
	Address: _____ _____

<b>VOLUNTARY INFORMATION</b>	<i>The City of Springfield is an Equal Employment Employer and complies with laws regarding annual reporting of statistical information. The following optional information will help us in reporting accurate information and is kept confidential. Your <u>voluntary</u> cooperation is appreciated.</i>
	Military Status: _____
	Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female
	Ethnic Group: <input type="checkbox"/> American Ind/Alaskan Native <input type="checkbox"/> Asian/Pacific Islander <input type="checkbox"/> Black <input type="checkbox"/> Hispanic <input type="checkbox"/> White <input type="checkbox"/> N/A
	Martial Status: <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Separated <input type="checkbox"/> Divorced
Highest Education Level: _____	

EMPLOYEE SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

Blank Compensation/Job Class Change Request Form  
Completed sample by Report Name



# COMPENSATION / JOB CLASS CHANGE FORM

Send completed approved forms to City Hall Payroll Department.

<b>ACTION</b>	<b>Effective Date of Change:</b> _____ <input type="checkbox"/> Job Class Change Only <input type="checkbox"/> Salary Change Only <input type="checkbox"/> Job Class and Salary Change <b>Reason for Change:</b> _____
<b>GENERAL INFORMATION</b>	<b>Employee Name:</b> Last: _____ First: _____ <b>Employee Number:</b> _____ <b>Last 4 Digits SSN:</b> _____ <b>Location:</b> _____ <b>Current Job Title:</b> Report A <b>Current Job Class #:</b> Report A <b>Current Annual Salary:</b> Pay Plans <b>Current Hourly Rate:</b> Pay Plans <b>Current Salary Plan/Grade:</b> Pay Plans <b>Request Submitted By:</b> _____
<b>PROPOSED JOB CLASS CHANGE</b>	<b>New Job Class #:</b> Report A <b>New Job Title:</b> Report A <b>Location:</b> Report B <b>Grp Bargaining Unit/Union:</b> Report C <b>Check Location:</b> Report E <b>Reports to:</b> _____ <b>Shift:</b> _____ <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <b>Civil Service:</b> <input type="checkbox"/> Y <input type="checkbox"/> N <b>Emp. Class:</b> <input type="checkbox"/> Permanent <input type="checkbox"/> Temporary <input type="checkbox"/> Seasonal <input type="checkbox"/> Emergency <input type="checkbox"/> Provisional <input type="checkbox"/> Intermittent <b>Backfill Existing Position</b> <input type="checkbox"/> YES <input type="checkbox"/> NO* <b>Prior Incumbent's Name:</b> _____
<b>PROPOSED SALARY CHANGE</b>	<b>New Annual Salary:</b> Pay Plans <input type="checkbox"/> Exempt <input type="checkbox"/> Non-Exempt <b>New Weekly Salary:</b> Pay Plans <b>New Hourly Rate:</b> Pay Plans <b>Standard Hours:</b> _____ <b>Salary Plan/Grade:</b> _____ <b>Start Date:</b> _____ <b>End Date:</b> _____ <b>Licenses:</b> <input type="checkbox"/> 725/726 CDL <input type="checkbox"/> 768/770 Pesticide <input type="checkbox"/> 727/728 Construction
<b>TLM</b>	<b>TLM Dept:</b> Report F <b>TLM Person Type:</b> Report F <b>TLM Payrule:</b> Report F <b>TLM Accrual Profile:</b> Report F
<b>FUNDING</b>	<input type="checkbox"/> General Fund <input type="checkbox"/> Grant Fund <b>Grant No:</b> _____ <b>Org:</b> _____ <b>Object:</b> _____ <b>Project:</b> _____ <b>Start Date:</b> _____ <b>End Date:</b> _____ <b>Budget Status:</b> Change is included in the budget: <input type="checkbox"/> YES <input type="checkbox"/> NO* *If NO, describe how the change will be funded: _____
<b>APPROVALS</b>	_____ <b>Manager Signature</b> Timothy J. Plante, Chief Adm Finance Officer _____ <b>Manager Print</b> Jennifer Winkler, Budget Director _____ <b>William E. Mahoney, Human Resources Director</b> Finance – Financial Analyst



# COMPENSATION / JOB CLASS CHANGE FORM

Send completed approved forms to City Hall Payroll Department.

<b>ACTION</b>	<b>Effective Date of Change:</b> _____ <input type="checkbox"/> Job Class Change Only <input type="checkbox"/> Salary Change Only <input type="checkbox"/> Job Class and Salary Change <b>Reason for Change:</b> _____						
<b>GENERAL INFORMATION</b>	<b>Employee Name:</b> Last: _____ First: _____ <b>Employee Number:</b> _____ <b>Last 4 Digits SSN:</b> _____ <b>Location:</b> _____ <b>Current Job Title:</b> _____ <b>Current Job Class #:</b> _____ <b>Current Annual Salary:</b> _____ <b>Current Hourly Rate:</b> _____ <b>Current Salary Plan/Grade:</b> _____ <b>Request Submitted By:</b> _____						
<b>PROPOSED JOB CLASS CHANGE</b>	<b>New Job Class #:</b> _____ <b>New Job Title:</b> _____ <b>Location:</b> _____ <b>Grp Bargaining Unit/Union:</b> _____ <b>Check Location:</b> _____ <b>Reports to:</b> _____ <b>Shift:</b> _____ <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <b>Civil Service:</b> <input type="checkbox"/> Y <input type="checkbox"/> N <b>Emp. Class:</b> <input type="checkbox"/> Permanent <input type="checkbox"/> Temporary <input type="checkbox"/> Seasonal <input type="checkbox"/> Emergency <input type="checkbox"/> Provisional <input type="checkbox"/> Intermittent <b>Backfill Existing Position</b> <input type="checkbox"/> YES <input type="checkbox"/> NO* <b>Prior Incumbent's Name:</b> _____						
<b>PROPOSED SALARY CHANGE</b>	<b>New Annual Salary:</b> _____ <input type="checkbox"/> Exempt <input type="checkbox"/> Non-Exempt <b>New Weekly Salary:</b> _____ <b>New Hourly Rate:</b> _____ <b>Standard Hours:</b> _____ <b>Salary Plan/Grade:</b> _____ <b>Start Date:</b> _____ <b>End Date:</b> _____ <b>Licenses:</b> <input type="checkbox"/> 725/726 CDL <input type="checkbox"/> 768/770 Pesticide <input type="checkbox"/> 727/728 Construction						
<b>TLM</b>	<b>TLM Dept:</b> _____ <b>TLM Person Type:</b> _____ <b>TLM Payrule:</b> _____ <b>TLM Accrual Profile:</b> _____						
<b>FUNDING</b>	<input type="checkbox"/> General Fund <input type="checkbox"/> Grant Fund <b>Grant No:</b> _____ <b>Org:</b> _____ <b>Object:</b> _____ <b>Project:</b> _____ <b>Start Date:</b> _____ <b>End Date:</b> _____ <b>Budget Status:</b> Change is included in the budget: <input type="checkbox"/> YES <input type="checkbox"/> NO* *If NO, describe how the change will be funded: _____						
<b>APPROVALS</b>	<table border="0" style="width: 100%;"> <tr> <td style="width: 50%; border-bottom: 1px solid black;">Manager Signature</td> <td style="width: 50%;">Timothy J. Plante, Chief Financial Officer</td> </tr> <tr> <td style="border-bottom: 1px solid black;">Manager Print</td> <td>Jennifer Wiinkler, Budget Director</td> </tr> <tr> <td style="border-bottom: 1px solid black;">William E. Mahoney, Human Resources Director</td> <td>Finance – Financial Analyst</td> </tr> </table>	Manager Signature	Timothy J. Plante, Chief Financial Officer	Manager Print	Jennifer Wiinkler, Budget Director	William E. Mahoney, Human Resources Director	Finance – Financial Analyst
Manager Signature	Timothy J. Plante, Chief Financial Officer						
Manager Print	Jennifer Wiinkler, Budget Director						
William E. Mahoney, Human Resources Director	Finance – Financial Analyst						

W-4 Blank document  
M-2 Blank document



# Form W-4 (2013)

**Purpose.** Complete Form W-4 so that your employer can withhold the correct federal income tax from your pay. Consider completing a new Form W-4 each year and when your personal or financial situation changes.

**Exemption from withholding.** If you are exempt, complete only lines 1, 2, 3, 4, and 7 and sign the form to validate it. Your exemption for 2013 expires February 17, 2014. See Pub. 505, Tax Withholding and Estimated Tax.

**Note.** If another person can claim you as a dependent on his or her tax return, you cannot claim exemption from withholding if your income exceeds \$1,000 and includes more than \$350 of unearned income (for example, interest and dividends).

**Basic instructions.** If you are not exempt, complete the **Personal Allowances Worksheet** below. The worksheets on page 2 further adjust your withholding allowances based on itemized deductions, certain credits, adjustments to income, or two-earners/multiple jobs situations.

Complete all worksheets that apply. However, you may claim fewer (or zero) allowances. For regular wages, withholding must be based on allowances you claimed and may not be a flat amount or percentage of wages.

**Head of household.** Generally, you can claim head of household filing status on your tax return only if you are unmarried and pay more than 50% of the costs of keeping up a home for yourself and your dependent(s) or other qualifying individuals. See Pub. 501, Exemptions, Standard Deduction, and Filing Information, for information.

**Tax credits.** You can take projected tax credits into account in figuring your allowable number of withholding allowances. Credits for child or dependent care expenses and the child tax credit may be claimed using the **Personal Allowances Worksheet** below. See Pub. 505 for information on converting your other credits into withholding allowances.

**Nonwage income.** If you have a large amount of nonwage income, such as interest or dividends, consider making estimated tax payments using Form 1040-ES, Estimated Tax for Individuals. Otherwise, you may owe additional tax. If you have pension or annuity

income, see Pub. 505 to find out if you should adjust your withholding on Form W-4 or W-4P.

**Two earners or multiple jobs.** If you have a working spouse or more than one job, figure the total number of allowances you are entitled to claim on all jobs using worksheets from only one Form W-4. Your withholding usually will be most accurate when all allowances are claimed on the Form W-4 for the highest paying job and zero allowances are claimed on the others. See Pub. 505 for details.

**Nonresident alien.** If you are a nonresident alien, see Notice 1392, Supplemental Form W-4 Instructions for Nonresident Aliens, before completing this form.

**Check your withholding.** After your Form W-4 takes effect, use Pub. 505 to see how the amount you are having withheld compares to your projected total tax for 2013. See Pub. 505, especially if your earnings exceed \$130,000 (Single) or \$180,000 (Married).

**Future developments.** Information about any future developments affecting Form W-4 (such as legislation enacted after we release it) will be posted at [www.irs.gov/w4](http://www.irs.gov/w4).

## Personal Allowances Worksheet (Keep for your records.)

<b>A</b>	Enter "1" for yourself if no one else can claim you as a dependent . . . . .	<b>A</b>	<u>      </u>
<b>B</b>	Enter "1" if: <span style="font-size: 2em; vertical-align: middle;">{</span> <ul style="list-style-type: none"> <li>• You are single and have only one job; or</li> <li>• You are married, have only one job, and your spouse does not work; or</li> <li>• Your wages from a second job or your spouse's wages (or the total of both) are \$1,500 or less.</li> </ul>	<b>B</b>	<u>      </u>
<b>C</b>	Enter "1" for your spouse. But, you may choose to enter "-0-" if you are married and have either a working spouse or more than one job. (Entering "-0-" may help you avoid having too little tax withheld.) . . . . .	<b>C</b>	<u>      </u>
<b>D</b>	Enter number of dependents (other than your spouse or yourself) you will claim on your tax return . . . . .	<b>D</b>	<u>      </u>
<b>E</b>	Enter "1" if you will file as head of household on your tax return (see conditions under <b>Head of household</b> above) . . . . .	<b>E</b>	<u>      </u>
<b>F</b>	Enter "1" if you have at least \$1,900 of child or dependent care expenses for which you plan to claim a credit . . . . .	<b>F</b>	<u>      </u>
<b>G</b>	<b>Child Tax Credit</b> (including additional child tax credit). See Pub. 972, Child Tax Credit, for more information. <ul style="list-style-type: none"> <li>• If your total income will be less than \$65,000 (\$95,000 if married), enter "2" for each eligible child; then less "1" if you have three to six eligible children or less "2" if you have seven or more eligible children.</li> <li>• If your total income will be between \$65,000 and \$84,000 (\$95,000 and \$119,000 if married), enter "1" for each eligible child . . . . .</li> </ul>	<b>G</b>	<u>      </u>
<b>H</b>	Add lines A through G and enter total here. ( <b>Note.</b> This may be different from the number of exemptions you claim on your tax return.) ▶	<b>H</b>	<u>      </u>

For accuracy, complete all worksheets that apply. {

- If you plan to itemize or claim adjustments to income and want to reduce your withholding, see the **Deductions and Adjustments Worksheet** on page 2.
- If you are single and have more than one job or are married and you and your spouse both work and the combined earnings from all jobs exceed \$40,000 (\$10,000 if married), see the **Two-Earners/Multiple Jobs Worksheet** on page 2 to avoid having too little tax withheld.
- If neither of the above situations applies, stop here and enter the number from line H on line 5 of Form W-4 below.

----- Separate here and give Form W-4 to your employer. Keep the top part for your records. -----

Form <b>W-4</b> Department of the Treasury Internal Revenue Service	<h2 style="margin: 0;">Employee's Withholding Allowance Certificate</h2> <p style="margin: 0;">▶ Whether you are entitled to claim a certain number of allowances or exemption from withholding is subject to review by the IRS. Your employer may be required to send a copy of this form to the IRS.</p>	OMB No. 1545-0074 <span style="font-size: 2em; font-weight: bold;">2013</span>
1 Your first name and middle initial <span style="float: right;">Last name</span>		2 Your social security number
Home address (number and street or rural route)		3 <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Married, but withhold at higher Single rate. <b>Note.</b> If married, but legally separated, or spouse is a nonresident alien, check the "Single" box.
City or town, state, and ZIP code		4 If your last name differs from that shown on your social security card, check here. You must call 1-800-772-1213 for a replacement card. ▶ <input type="checkbox"/>
5 Total number of allowances you are claiming (from line H above or from the applicable worksheet on page 2)		5 <u>      </u>
6 Additional amount, if any, you want withheld from each paycheck		6 \$ <u>      </u>
7 I claim exemption from withholding for 2013, and I certify that I meet both of the following conditions for exemption. <ul style="list-style-type: none"> <li>• Last year I had a right to a refund of all federal income tax withheld because I had no tax liability, and</li> <li>• This year I expect a refund of all federal income tax withheld because I expect to have no tax liability.</li> </ul> If you meet both conditions, write "Exempt" here . . . . . ▶		7 <u>      </u>
Under penalties of perjury, I declare that I have examined this certificate and, to the best of my knowledge and belief, it is true, correct, and complete.		
Employee's signature (This form is not valid unless you sign it.) ▶		Date ▶
8 Employer's name and address (Employer: Complete lines 8 and 10 only if sending to the IRS.)		9 Office code (optional)
		10 Employer identification number (EIN)

### Deductions and Adjustments Worksheet

**Note.** Use this worksheet *only* if you plan to itemize deductions or claim certain credits or adjustments to income.

- 1 Enter an estimate of your 2013 itemized deductions. These include qualifying home mortgage interest, charitable contributions, state and local taxes, medical expenses in excess of 10% (7.5% if either you or your spouse was born before January 2, 1949) of your income, and miscellaneous deductions. For 2013, you may have to reduce your itemized deductions if your income is over \$300,000 and you are married filing jointly or are a qualifying widow(er); \$275,000 if you are head of household; \$250,000 if you are single and not head of household or a qualifying widow(er); or \$150,000 if you are married filing separately. See Pub. 505 for details. . . . 1 \$ \_\_\_\_\_
- 2 Enter:  $\left\{ \begin{array}{l} \$12,200 \text{ if married filing jointly or qualifying widow(er)} \\ \$8,950 \text{ if head of household} \\ \$6,100 \text{ if single or married filing separately} \end{array} \right\}$  . . . . . 2 \$ \_\_\_\_\_
- 3 Subtract line 2 from line 1. If zero or less, enter "-0-" . . . . . 3 \$ \_\_\_\_\_
- 4 Enter an estimate of your 2013 adjustments to income and any additional standard deduction (see Pub. 505) . . . . . 4 \$ \_\_\_\_\_
- 5 Add lines 3 and 4 and enter the total. (Include any amount for credits from the *Converting Credits to Withholding Allowances for 2013 Form W-4* worksheet in Pub. 505.) . . . . . 5 \$ \_\_\_\_\_
- 6 Enter an estimate of your 2013 nonwage income (such as dividends or interest) . . . . . 6 \$ \_\_\_\_\_
- 7 Subtract line 6 from line 5. If zero or less, enter "-0-" . . . . . 7 \$ \_\_\_\_\_
- 8 Divide the amount on line 7 by \$3,900 and enter the result here. Drop any fraction . . . . . 8 \_\_\_\_\_
- 9 Enter the number from the **Personal Allowances Worksheet**, line H, page 1 . . . . . 9 \_\_\_\_\_
- 10 Add lines 8 and 9 and enter the total here. If you plan to use the **Two-Earners/Multiple Jobs Worksheet**, also enter this total on line 1 below. Otherwise, **stop here** and enter this total on Form W-4, line 5, page 1 . . . . . 10 \_\_\_\_\_

### Two-Earners/Multiple Jobs Worksheet (See *Two earners or multiple jobs* on page 1.)

**Note.** Use this worksheet *only* if the instructions under line H on page 1 direct you here.

- 1 Enter the number from line H, page 1 (or from line 10 above if you used the **Deductions and Adjustments Worksheet**) . . . . . 1 \_\_\_\_\_
- 2 Find the number in **Table 1** below that applies to the **LOWEST** paying job and enter it here. **However**, if you are married filing jointly and wages from the highest paying job are \$65,000 or less, do not enter more than "3" . . . . . 2 \_\_\_\_\_
- 3 If line 1 is **more than or equal to** line 2, subtract line 2 from line 1. Enter the result here (if zero, enter "-0-") and on Form W-4, line 5, page 1. **Do not** use the rest of this worksheet . . . . . 3 \_\_\_\_\_

**Note.** If line 1 is **less than** line 2, enter "-0-" on Form W-4, line 5, page 1. Complete lines 4 through 9 below to figure the additional withholding amount necessary to avoid a year-end tax bill.

- 4 Enter the number from line 2 of this worksheet . . . . . 4 \_\_\_\_\_
- 5 Enter the number from line 1 of this worksheet . . . . . 5 \_\_\_\_\_
- 6 Subtract line 5 from line 4 . . . . . 6 \_\_\_\_\_
- 7 Find the amount in **Table 2** below that applies to the **HIGHEST** paying job and enter it here . . . . . 7 \$ \_\_\_\_\_
- 8 Multiply line 7 by line 6 and enter the result here. This is the additional annual withholding needed . . . . . 8 \$ \_\_\_\_\_
- 9 Divide line 8 by the number of pay periods remaining in 2013. For example, divide by 25 if you are paid every two weeks and you complete this form on a date in January when there are 25 pay periods remaining in 2013. Enter the result here and on Form W-4, line 6, page 1. This is the additional amount to be withheld from each paycheck . . . . . 9 \$ \_\_\_\_\_

Table 1				Table 2			
Married Filing Jointly		All Others		Married Filing Jointly		All Others	
If wages from <b>LOWEST</b> paying job are—	Enter on line 2 above	If wages from <b>LOWEST</b> paying job are—	Enter on line 2 above	If wages from <b>HIGHEST</b> paying job are—	Enter on line 7 above	If wages from <b>HIGHEST</b> paying job are—	Enter on line 7 above
\$0 - \$5,000	0	\$0 - \$8,000	0	\$0 - \$72,000	\$590	\$0 - \$37,000	\$590
5,001 - 13,000	1	8,001 - 16,000	1	72,001 - 130,000	980	37,001 - 80,000	980
13,001 - 24,000	2	16,001 - 25,000	2	130,001 - 200,000	1,090	80,001 - 175,000	1,090
24,001 - 26,000	3	25,001 - 30,000	3	200,001 - 345,000	1,290	175,001 - 385,000	1,290
26,001 - 30,000	4	30,001 - 40,000	4	345,001 - 385,000	1,370	385,001 and over	1,540
30,001 - 42,000	5	40,001 - 50,000	5	385,001 and over	1,540		
42,001 - 48,000	6	50,001 - 70,000	6				
48,001 - 55,000	7	70,001 - 80,000	7				
55,001 - 65,000	8	80,001 - 95,000	8				
65,001 - 75,000	9	95,001 - 120,000	9				
75,001 - 85,000	10	120,001 and over	10				
85,001 - 97,000	11						
97,001 - 110,000	12						
110,001 - 120,000	13						
120,001 - 135,000	14						
135,001 and over	15						

**Privacy Act and Paperwork Reduction Act Notice.** We ask for the information on this form to carry out the Internal Revenue laws of the United States. Internal Revenue Code sections 3402(f)(2) and 6109 and their regulations require you to provide this information; your employer uses it to determine your federal income tax withholding. Failure to provide a properly completed form will result in your being treated as a single person who claims no withholding allowances; providing fraudulent information may subject you to penalties. Routine uses of this information include giving it to the Department of Justice for civil and criminal litigation; to cities, states, the District of Columbia, and U.S. commonwealths and possessions for use in administering their tax laws; and to the Department of Health and Human Services for use in the National Directory of New Hires. We may also disclose this information to other countries under a tax treaty, to federal and state agencies to enforce federal nontax criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism.

You are not required to provide the information requested on a form that is subject to the Paperwork Reduction Act unless the form displays a valid OMB control number. Books or records relating to a form or its instructions must be retained as long as their contents may become material in the administration of any Internal Revenue law. Generally, tax returns and return information are confidential, as required by Code section 6103.

The average time and expenses required to complete and file this form will vary depending on individual circumstances. For estimated averages, see the instructions for your income tax return.

If you have suggestions for making this form simpler, we would be happy to hear from you. See the instructions for your income tax return.

FORM  
M-4

MASSACHUSETTS EMPLOYEE'S WITHHOLDING EXEMPTION CERTIFICATE

Rev. 1/12



Print full name ..... Social Security no. ....  
Print home address ..... City ..... State ..... Zip .....

**Employee:**

File this form or Form W-4 with your employer. Otherwise, Massachusetts Income Taxes will be withheld from your wages without exemptions.

**Employer:**

Keep this certificate with your records. If the employee is believed to have claimed excessive exemptions, the Massachusetts Department of Revenue should be so advised.

**HOW TO CLAIM YOUR WITHHOLDING EXEMPTIONS**

1. Your personal exemption. Write the figure "1." If you are age 65 or over or will be before next year, write "2" .....
2. If married and if exemption for spouse is allowed, write the figure "4." If your spouse is age 65 or over or will be before next year and if otherwise qualified, write "5." See Instruction C. ....
3. Write the number of your qualified dependents. See Instruction D. ....
4. Add the number of exemptions which you have claimed above and write the total. ....
5. Additional withholding per pay period under agreement with employer \$ \_\_\_\_\_
  - A.  Check if you will file as head of household on your tax return.
  - B.  Check if you are blind.      C.  Check if spouse is blind and not subject to withholding.
  - D.  Check if you are a full-time student engaged in seasonal, part-time or temporary employment whose estimated annual income will not exceed \$8,000.

**EMPLOYER: DO NOT withhold if Box D is checked.**

I certify that the number of withholding exemptions claimed on this certificate does not exceed the number to which I am entitled.

Date ..... Signed .....

**THIS FORM MAY BE REPRODUCED**

**THE COMMONWEALTH OF MASSACHUSETTS, DEPARTMENT OF REVENUE**

**A. Number.** If you claim more than the correct number of exemptions, civil and criminal penalties may be imposed. You may claim a smaller number of exemptions. If you do not file a certificate, your employer must withhold on the basis of no exemptions.

If you expect to owe more income tax than will be withheld, you may either claim a smaller number of exemptions or enter into an agreement with your employer to have additional amounts withheld.

You should claim the total number of exemptions to which you are entitled to prevent excessive overwithholding, unless you have a significant amount of other income.

**If you work for more than one employer at the same time, you must not claim any exemptions with employers other than your principal employer.**

If you are married and if your spouse is subject to withholding, each may claim a personal exemption.

**B. Changes.** You may file a new certificate at any time if the number of exemptions increases. You must file a new certificate within 10 days if the number of exemptions previously claimed by you decreases. For example, if during the year your dependent son's income indicates that you will not provide over half of his support for the year, you must file a new certificate.

**C. Spouse.** If your spouse is not working or if she or he is working but not claiming the personal exemption or the age 65 or over exemption, generally you may claim those exemptions in line 2. However, if you are planning to file separate annual tax returns, you should not claim withholding exemptions for your spouse or for any dependents that will not be claimed on your annual tax return.

If claiming a wife or husband, write "4" in line 2. Using "4" is the withholding system adjustment for the \$4,400 exemption for a spouse.

**D. Dependent(s).** You may claim an exemption in line 3 for each individual who qualifies as a dependent under the Federal Income Tax Law. In addition, if one or more of your dependents will be under age 12 at year end, add "1" to your dependents total for line 3.

You are not allowed to claim "federal withholding deductions and adjustments" under the Massachusetts withholding system.

If you have income not subject to withholding, you are urged to have additional amounts withheld to cover your tax liability on such income. See line 5.

**IF THE ALLOWABLE MASSACHUSETTS WITHHOLDING EXEMPTIONS ARE THE SAME AS YOU ARE CLAIMING FOR U.S. INCOME TAXES, COMPLETE U.S. FORM W-4 ONLY.**

## Report A: Job Class and Job Title

JOB CLASS
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Job	Description
2714	311 CALL CENTER DIRECTOR
1725	311 CALL CENTER SERVICE REP
1733	311 SENIOR CALL CTR REP
9600	ACC DEATH SURVIVOR
9680	ACC DIS JOB RELATED
9868	ACC DIS JOB RELATED
9870	ACC DIS JOB RELATED ANNUITY
5601	ACCOUNT CLERK
0001	ACCOUNT CLERK
0002	ACCOUNT CLERK SR
5444	ACCOUNTANT
0003	ACCOUNTS PAYABLE CLERK
0004	ACCOUNTS PAYABLE CLERK SR
0502	ADMIN AIDE TO CITY COUNCIL
0503	ADMIN AIDE TO CITY COUNCIL SR
1003	ADMIN ASST FISCAL MGR
5499	ADMIN SUSP
1615	ADMINISTRATION & FINANCIAL COO
0542	ADMINISTRATIVE ASST TO MAYOR
0504	ADMINISTRATIVE AIDE TO MAYOR
5600	ADMINISTRATIVE ASSISTANT
0541	ADMINISTRATIVE ASSISTANT FACIL
0537	ADMINISTRATIVE ASSISTANT-14.5
0506	ADMINISTRATIVE ASSISTANT-CD
0534	ADMINISTRATIVE ASSISTANT-FIRE
0536	ADMINISTRATIVE ASSISTANT-OTHER
0505	ADMINISTRATIVE ASST NON BARG
0540	ADMINISTRATIVE ASSTISTANT - IT
2240	ADMINISTRATIVE OFFICER
5567	ADMINISTRATIVE SUPPORT
6005	ADMINISTRATIVE SUPPORT
5784	ADMINISTRATOR
0535	ADMINSTRATIVE ASST- TREAS PURC
5711	ADULT EDUCATION
2404	ADULT LITERACY MANAGER
1915	ADULT LITERACY PROG ASSISTANT
2433	ADULT LITERACY SUB TEACHER
2421	ADULT LITERACY TEACHER
1703	AFTER SCHOOL PROGRAM COORD
3616	AIR COND REFRIG REPAIRMAN
5412	AIR COND RFRG REPAIRMAN
5686	ANALYST
1900	ANIMAL ADOPTION CARE COUNSEL

JOB CLASS
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Job	Description
<u>2434</u>	ANIMAL CONTROL OFFICER
<u>2907</u>	ANTI GANG COORDINATOR
<u>3200</u>	APPLICATIONS DEVELOPER
<u>2239</u>	AQUATICS MANAGER
<u>4330</u>	ARBORIST
<u>6402</u>	ASSESSMENT
<u>2602</u>	ASSESSOR
<u>1600</u>	ASSESSOR ANALYST
<u>1613</u>	ASSESSOR ANALYST ASST
<u>4301</u>	ASSISTANT MUNGROUP MAINT COO
<u>0538</u>	ASSISTANT ADMINISTRATIVE SPECI
<u>1602</u>	ASSISTANT ASSESSOR I
<u>2728</u>	ASSISTANT CITY CLERK
<u>2608</u>	ASSISTANT CITY COLLECTOR
<u>2254</u>	ASSISTANT CITY FORESTER
<u>2707</u>	ASSISTANT CITY SOLICITOR
<u>2712</u>	ASSISTANT DEPUTY DIRECTOR ENGI
<u>2202</u>	ASSISTANT DPW DIRECTOR
<u>3113</u>	ASSISTANT FIRE PREVENTION SPV
<u>2253</u>	ASSISTANT FLEET MANAGER
<u>2808</u>	ASSISTANT LIBRARY DIRECTOR
<u>2715</u>	ASSISTANT PERSONNEL DIRECTOR
<u>5263</u>	ASSISTANT PRINCIPAL
<u>1603</u>	ASSISTANT PURCHASING AGENT
<u>2726</u>	ASSISTANT SOLID WASTE MANAGER
<u>2603</u>	ASSISTANT TREASURER
<u>2115</u>	ASSISTANT TREASURY ANALYST
<u>1610</u>	ASSOC FINAN INFO SPECIALIST
<u>1604</u>	ASST ASSESSOR II
<u>2200</u>	ASST DIRECTOR OF RECREATION
<u>2209</u>	ASST DIRECTOR OF SCHOOL BUILD
<u>2729</u>	ASST DEPUTY DIR OF ENGINEERING
<u>2710</u>	ASST DEPUTY OF OPERATIONS DPW
<u>2721</u>	ASST DIRECTOR OF EMPLOYEE OPS
<u>2614</u>	ASST RETIREMENT SYSTEM ADMIN
<u>6822</u>	ASST SUPT FOR ACDMCS
<u>6821</u>	ASST SUPT FOR SCHLS
<u>6155</u>	ASST SUPT PROG LEAD SUCC PLAN
<u>2701</u>	ASSTDIRPARKS OPENSACEMAIN
<u>1737</u>	ATH FIELD/BR NIGHTS ASST COORD
<u>5709</u>	ATHLETIC TRAINER
<u>1704</u>	ATHLETICFLDS BRIGHTNIGHTCOORD
<u>6194</u>	ATTENDANCE

JOB CLASS
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Job	Description
<u>2604</u>	AUDITOR
<u>4101</u>	AUTO REFUSE COL DRIVER SEMI
<u>4102</u>	AUTO REFUSE COLLECTION DRIVER
<u>3629</u>	AUTO TRUCK BODY REPAIRMAN
<u>2211</u>	BANQUET MANAGER
<u>2246</u>	BANQUET MANAGER, ASST
<u>4609</u>	BASKETBALL CLINIC SUPERVISOR
<u>6391</u>	BAYSTATE READER SPECIALIST
<u>2702</u>	BD OF ELECT COMM SECRETARY
<u>4966</u>	BEN ONLY- 75 25 DB CITY
<u>4967</u>	BEN ONLY- 75 25 DB SCHOOL
<u>4965</u>	BEN ONLY- 75 25 DB TEACHER
<u>4962</u>	BEN ONLY- CITY RETIREE
<u>4960</u>	BEN ONLY- COBRA 102 PCT
<u>4959</u>	BEN ONLY- COBRA 35 PCT
<u>4961</u>	BEN ONLY- RETIRED TEACHER
<u>4956</u>	BEN ONLY- RETIREE
<u>4968</u>	BEN ONLY- RETIREE UNKNOWN
<u>4963</u>	BEN ONLY- SCHL RETIREE NON TEA
<u>4958</u>	BEN ONLY- SURVIVING SPOUSE
<u>4964</u>	BEN ONLY- WATER SEWER
<u>9500</u>	BENEFIT ONLY
<u>2212</u>	BENEFITS ANALYST
<u>2214</u>	BENEFITS CONSULTANT
<u>5031</u>	BILINGUAL
<u>1705</u>	BILINGUAL ELECTION PROGRM COOR
<u>6054</u>	BILINGUAL PARA
<u>1000</u>	BILLING CLERK
<u>2600</u>	BOARD OF ASSESSORS CHAIRMAN
<u>0513</u>	BOARD SECRETARY
<u>5069</u>	BPS COUNSELOR
<u>5068</u>	BPS OTHER
<u>2422</u>	BRANCH SUPERVISOR
<u>6536</u>	BREAKFAST SUPERVISOR
<u>2601</u>	BUDGET DIRECTOR
<u>4304</u>	BUILDING CUSTODIAN A
<u>4305</u>	BUILDING CUSTODIAN B
<u>4306</u>	BUILDING CUSTODIAN SENIOR C
<u>2237</u>	BUILDING INSPECTOR
<u>2244</u>	BUILDING INSPECTOR,SR
<u>4300</u>	BUILDING SUPERVISOR
<u>2439</u>	BUSINESS DEVELOPMENT COORDINA
<u>2256</u>	CAD OPERATIONS MANAGER

JOB CLASS
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Job	Description
<u>2243</u>	CAD SYSTEM ADMINISTRATOR
<u>2103</u>	CAPITAL ASSET CONSTR DIR
<u>3617</u>	CARPENTER
<u>5414</u>	CARPENTER
<u>1901</u>	CASE MANAGER
<u>1907</u>	CASE MANAGER
<u>5081</u>	CERTIFIED NURSES ASST
<u>2621</u>	CHIEF ADM FINANCE OFFICER
<u>2805</u>	CHIEF DEVELOPMENT OFFICER
<u>2606</u>	CHIEF FINANCIAL OFFICER
<u>2703</u>	CHIEF INFORMATION OFFICER
<u>6137</u>	CHIEF OF SCHOOL OFFICER
<u>2442</u>	CHIEF OPERATIONS OFFICER
<u>2607</u>	CHIEF PROCUREMENT OFFICER
<u>1922</u>	CHILDRENS LIBRARIAN
<u>2201</u>	CITISTAT ANALYST
<u>2718</u>	CITISTAT DIRECTOR
<u>2203</u>	CITISTAT SENIOR ANALYST
<u>2704</u>	CITY CLERK
<u>2705</u>	CITY CLERK DEPUTY ASSISTANT
<u>2609</u>	CITY COLLECTOR TREASURER
<u>0514</u>	CITY COUNCIL CLERK
<u>2719</u>	CITY ENGINEER
<u>2238</u>	CITY FORESTER
<u>2706</u>	CITY SOLICITOR
<u>2204</u>	CITY SOLICITOR 1ST ASSOCIATE
<u>2206</u>	CITY SOLICITOR 2ND ASSOCIATE
<u>2208</u>	CITY SOLICITOR 3RD ASSOCIATE
<u>2205</u>	CITY SOLICITOR 4TH ASSOCIATE
<u>2259</u>	CITY SOLICITOR 3RD ASSOC HR&LR
<u>4957</u>	CITY TERMINATED
<u>2234</u>	CIVIL ENGINEER ASSISTANT
<u>2236</u>	CIVIL ENGINEER III
<u>2233</u>	CIVIL ENGINEER GRADE 5B
<u>2235</u>	CIVIL ENGINEER I
<u>1700</u>	CLAIMS AGENT LEGAL
<u>5002</u>	CLASSROOM
<u>6050</u>	CLASSROOM PARA
<u>1706</u>	CLEAN CITY MANAGER
<u>5474</u>	CLERICAL
<u>1002</u>	CLERICAL AIDE
<u>0520</u>	CLERK PRINCIPAL
<u>0516</u>	CLERK STENOGRAPHER PRINCIPAL



JOB CLASS
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Job	Description
0517	CLERK STENOGRAPHER SENIOR
0518	CLERK TYPIST PRINCIPAL
0519	CLERK TYPIST SENIOR
2435	CLINICAL DIRECTOR
6116	CNA OCCUP THERAPIST ASST
5849	COACH
2800	CODE ENFORCEMENT COMMISSIONER
2210	COLLECTIVE BARGAINING AGENT
2610	COMMISSIONER OF CONTRACT COMPL
3201	COMMUNICATIONS TECHNICIAN
1919	COMMUNITY HEALTH ADVOCATE
3410	COMMUNITY HEALTH NURSE
2912	COMMUNITY POLICE LIAISON
2400	COMMUNITY RELATIONS DIRECTOR
5678	COMP SYS NETWRK MNGR
6467	COMP SYS TECH RED180
2615	COMPROLLER
0521	COMPUTER OPERATOR PRINCIPAL
3209	COMPUTER OPERATOR, LEAD
3208	COMPUTER TECHNICIAN BARGAININ
3212	COMPUTER TECHNICIAN NON BARGA
5669	CONFIDENTIAL EXECUTIVE ASSI
5670	CONFIDENTIAL SR EXECUTIVE ASSI
4327	CONSTRUCTION HANDYMAN DPW
3409	CONSTRUCTION INSPECTOR I
6509	CONT QUALITY IMPROVE MANAGER
2258	CONTRACT COMPLIANCE OFFICER
2213	CONTRACTS ADMINISTRATOR DPW
3211	CONTROL TECHNICIAN
5419	CONTROL TECHNICIAN
6127	COORDINATOR
6209	CORNERSTONE SUPPORT TEACHER
0006	COST CONTROL CLERK
4901	COUNCILOR
1902	COVERAGE KIDS FAM PROG CO
6105	CPDT
2911	CRIME ANALYST
5437	CROSSING GUARDS
6708	CUSTODIAN SUSPENSE
1614	CUSTOMER SERVICE RECON SUP
1718	CUSTOMER SERVICE REPRESENTATIV
0522	DATA ENTRY OPERATOR
1702	DATA ENTRY SUPERVISOR

JOB CLASS
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Job	Description
<u>5706</u>	DELIVERY DRIVER
<u>3400</u>	DENTAL ASSISTANT
<u>3405</u>	DENTAL HYGIENIST
<u>3413</u>	DENTAL HYGIENIST, REGISTERED
<u>2401</u>	DENTIST
<u>2814</u>	DEP DIR OF ECONOMIC DEVELOP
<u>2724</u>	DEPUTY CHIEF INFORMATION OFFIC
<u>2720</u>	DEPUTY CITY SOLICITOR
<u>2818</u>	DEPUTY CODE ENFORCEMENT COMM
<u>2605</u>	DEPUTY COMPTROLLER
<u>2801</u>	DEPUTY DIR OF NEIGHBORHOODS
<u>2819</u>	DEPUTY DIRECTOR GRANTS MGMT
<u>2820</u>	DEPUTY DIRECTOR NEIGH STAB
<u>2250</u>	DEPUTY DIRECTOR OF ADM FIN DPW
<u>2812</u>	DEPUTY DIRECTOR OF HOMELESSNES
<u>2813</u>	DEPUTY DIRECTOR OF HOUSING
<u>2252</u>	DEPUTY DIRECTOR OPER AND MAINT
<u>2815</u>	DEPUTY DIRECTOR VETERAN SERV
<u>3100</u>	DEPUTY FIRE CHIEF
<u>2802</u>	DEPUTY PLANNING DIRECTOR
<u>2900</u>	DEPUTY POLICE CHIEF
<u>2611</u>	DEPUTY PROCUREMENT OFFICER
<u>2613</u>	DEPUTY PURCHASING AGENT
<u>2909</u>	DETENTION ATTENDANT
<u>3114</u>	DIR DISASTER RECOV COMPLIANCE
<u>2727</u>	DIR FINANCE AND ADMINS FIRE
<u>2708</u>	DIR OF HR AND LABOR RELATIONS
<u>5271</u>	DIRECTOR
<u>2242</u>	DIRECTOR OF FIRE TRAINING
<u>2804</u>	DIRECTOR OF VETERANS SVCS
<u>2215</u>	DIRECTOR APPLICATIONS DELIVERY
<u>2409</u>	DIRECTOR MAYORS OFF OF CON IN
<u>2612</u>	DIRECTOR OF ADMIN AND FINANCE
<u>2722</u>	DIRECTOR OF BUSINESS AND TECH
<u>2408</u>	DIRECTOR OF CONSTITUE SERVICES
<u>2725</u>	DIRECTOR OF DISPATCH
<u>2806</u>	DIRECTOR OF ELDER AFFAIRS
<u>3102</u>	DIRECTOR OF EMERG PREPARD
<u>2622</u>	DIRECTOR OF FINANCE & ADMINIST
<u>2803</u>	DIRECTOR OF HHS
<u>2816</u>	DIRECTOR OF HOUSING
<u>2617</u>	DIRECTOR OF INTERNAL AUDIT
<u>2700</u>	DIRECTOR OF ITD OPERATIONS

JOB CLASS
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Job	Description
<u>2251</u>	DIRECTOR OF LICENSING
<u>2709</u>	DIRECTOR OF PARKS BUILD REC
<u>2241</u>	DIRECTOR OF PUBLIC SAFETY IT
<u>2619</u>	DIRECTOR OF RETIREMENT SERVICE
<u>3110</u>	DISTRICT FIRE CHIEF
<u>3107</u>	DISTRICT FIRE CHIEF COMMANDER
<u>1924</u>	DIVISION COORDINATOR
<u>2914</u>	DOMESTIC VIOLENCE ADVOCATE
<u>2913</u>	DOMESTIC VIOLENCE COORDINATOR
<u>2711</u>	DPW DIRECTOR
<u>6024</u>	DRIVER
<u>6823</u>	E CHLD EVAL TRNS SPC
<u>5868</u>	EARLY INTERVENTION TEACHER
<u>1707</u>	EDUCATION COORDINATOR
<u>0523</u>	ELECTION ASSISTANT
<u>0533</u>	ELECTION CLERK
<u>0524</u>	ELECTION OFFICE SPECIALIST
<u>3618</u>	ELECTRICIAN
<u>5420</u>	ELECTRICIAN
<u>3601</u>	ELECTRICIAN MAINTENANCE TRAFF
<u>3602</u>	ELECTRONIC TECHNICIAN
<u>2255</u>	EMPLOYMENT INSURANCE COORDINAT
<u>1730</u>	EMPLOYMENT SPECIALIST
<u>2248</u>	ENERGY CONSERVATION PROJ MGR
<u>2216</u>	ENERGY MANAGER
<u>1701</u>	ENGINEERING AIDE SENIOR
<u>5461</u>	ENROLLMENT SPECIALST
<u>2217</u>	ENVIRONMENTAL HEALTH DIRECTOR
<u>2218</u>	EQUAL OPPORTUNITY ADMINISTRATO
<u>2618</u>	EXEC DIR RETIREMENT SERVICES
<u>5453</u>	EXECUTIVE
<u>6420</u>	EXECUTIVE
<u>5834</u>	EXECUTIVE ASSISTANT
<u>0508</u>	EXECUTIVE ASSISTANT BARGAININ
<u>0507</u>	EXECUTIVE ASST NON BARGAINING
<u>2821</u>	EXECUTIVE DIRECTOR SRA
<u>2410</u>	EXECUTIVE DIRECTOR TJO
<u>3202</u>	FACILITIES DESIGNER
<u>FAC</u>	FACILITIES EMPLOYEE
<u>2230</u>	FACILITIES ENGINEER
<u>4316</u>	FACILITIES MAINTENANCEMAN
<u>4619</u>	FACILITY (BATH) ATTENDANT
<u>5463</u>	FAMILY SPEC AND COORD

JOB CLASS
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Job	Description
6814	FIN PROCUREMENT OFF
2616	FINANCE DIRECTOR
2104	FINANCIAL ACCOUNTANT
2105	FINANCIAL ACCOUNTING MANAGER
2118	FINANCIAL ACCT AR SPECIALIST
2106	FINANCIAL ANALYST
2117	FINANCIAL ANALYST NON FINANCE
1601	FINANCIAL INFORMATION SPECIALI
3108	FIRE ALARM SYSTEM SUPERVISOR
3103	FIRE ALARM SYSTEMS ASST SUPV
3603	FIRE APPARATUS REPAIRMAN
3104	FIRE CAPTAIN
3101	FIRE COMMISSIONER
3109	FIRE DISPATCHER
3105	FIRE LIEUTENANT
2620	FIRE MARSHAL
3111	FIRE REPAIRS SUPERVISOR
3106	FIREFIGHTER
1606	FISCAL ADMIN MANAGER
1618	FISCAL MANAGER
1925	FITNESS COORDINATOR
2723	FLEET MANAGER
1708	FOREST PARK COORDINATOR
4324	GARAGE FOREMAN
4307	GARDENER
3406	GIS PLANNING TECHNICIAN
3619	GLAZIER
5421	GLAZIER
4617	GOLF COURSE WORKER
2101	GRANT DEVELOPMENT MANAGER
4308	GREENS HELPER
2220	GREENS SUPERINTENDENT
1716	GREENS SUPERINTENDENT ASST
4309	GROUNDS MAINTENANCE MAN
1709	GROUNDS SERVICE COORDINATOR
4310	GROUNDS WORKER
4611	GYM SUPERVISOR
1914	HHS EDUCATOR
1920	HIV AIDS COORDINATOR
1903	HOLYOAK REACH COORDINATOR
1926	HOME PROGRAM COORDINATOR
1908	HOUSING COORDINATOR
1616	HR FILE & RECORDS COORDINATOR

JOB CLASS
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Job	Description
<u>2121</u>	HR PAYROLL INFORMATION MANAGER
<u>2107</u>	HR PAYROLL MANAGER
<u>5673</u>	HUMAN RESOURCE
<u>6056</u>	HUMAN RESOURCE
<u>6104</u>	ILS
<u>3210</u>	INFO TECHNOLOGY SPECIALIST
<u>2423</u>	INFORMATION SERVICES SUPERVISOR
<u>5584</u>	INFORMATION SYSTEM
<u>3203</u>	INFORMATION TECH SPECIALIST
<u>6547</u>	INFORMATION TECHNOLOGY
<u>1020</u>	INSPECTIONAL SERV CLK, SENIOR
<u>1008</u>	INSPECTIONAL SERVICE CLERK
<u>2420</u>	INSPECTOR CODE ENFORCEMENT
<u>3407</u>	INSPECTOR CODE ENFORCEMENT SE
<u>0526</u>	INSURANCE CLERK
<u>2108</u>	INSURANCE CONSULTANT
<u>2713</u>	INSURANCE DIRECTOR
<u>6206</u>	INTENSIVE READ LANG ARTS TCH
<u>4971</u>	INTERN
<u>2424</u>	INTERNET REGIONAL REF LIBRARIA
<u>2440</u>	INTERNIST & PEDIATRICIAN
<u>5409</u>	JUNIOR CUSTODIAN
<u>2247</u>	LABOR RELATIONS ATTORNEY
<u>4321</u>	LABORER
<u>4103</u>	LABORER REFUSE COLLECTION
<u>4322</u>	LABORER SKILLED
<u>3604</u>	LABORER SKILLED MEO
<u>3605</u>	LABORER SKILLED MEO HMEO SHMEO
<u>4319</u>	LANDFILL FOREMAN
<u>5137</u>	LANGUAGE ARTS READING
<u>0509</u>	LAW CLERK
<u>4331</u>	LEAD ARBORIST
<u>2441</u>	LIB VOL LITERACY TUTOR COORD
<u>5138</u>	LIBRARIAN
<u>1010</u>	LIBRARY ACQUISITIONS CLERK
<u>2425</u>	LIBRARY ASSOCIATE
<u>1910</u>	LIBRARY BRANCH MANAGER
<u>2405</u>	LIBRARY BUSINESS MANAGER
<u>1923</u>	LIBRARY COMM RELATIONS COORDIN
<u>1013</u>	LIBRARY COPY CATALOGER
<u>2122</u>	LIBRARY DEVELOPMENT MANAGER
<u>2807</u>	LIBRARY DIRECTOR
<u>1911</u>	LIBRARY INFO TECH MANAGER

JOB CLASS
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Job	Description
2432	LIBRARY MAINTENANCE SUPERVISOR
2402	LIBRARY MGR TECH SRV COLL DEV
2403	LIBRARY MGR YOUTH OUTREACH SVC
2406	LIBRARY MNGR BORROWERS SERV
2407	LIBRARY MNGR INFORMATION SERV
1015	LIBRARY OFFICE ASSISTANT
2426	LIBRARY PREPARATION SPECIALIST
1017	LIBRARY PRIN CLK, BRANCH
1014	LIBRARY PRIN CLK, INTERLIB LOA
1012	LIBRARY PRIN CLK,COMP LAB
1018	LIBRARY SENIOR CLERK
1019	LIBRARY SENIOR PAGE
1929	LIBRARY TECHNICAL SERVICE SPVR
5334	LICENSED PRACTICAL NURSE
4601	LIFEGUARD
4602	LIFEGUARD HEAD
6818	LONG TERM SUBSTITUTE
5704	LUNCH SUPERVISOR
4311	MAINTENANCE CRAFTSMAN PARK
4312	MAINTENANCE CRAFTSMAN DPW
2119	MANAGEMENT ANALYST
5760	MANAGER
2437	MANAGER OF PUBLIC SERVICES
3620	MASON
5422	MASON
2438	MASS CALL 2 DIRECTOR
3606	MASTER MECHANIC ASE
6118	MATHEMATICS RESC TCH
4900	MAYOR
2411	MAYORS CHIEF OF STAFF
1909	MEDIATOR
1007	MEDICAL BILLER
1022	MEDICAL RESERVE ADVOCATE
0500	MEMBER SERVICES COORDINATOR
6014	MENT TCH MONT RSC SP
6010	MENTOR TCH KINDERGARTEN PGRM
3607	MER WELDER
1009	MESSENGER CLERK
2245	MMRS PROJECT PLANNER
1904	MORT OUTREACH WORKER
3608	MOTOR EQUIP REPAIRMAN SR AS
3609	MOTOR EQUIPMENT OPER HEAVY
3610	MOTOR EQUIPMENT OPER SPECIAL

JOB CLASS
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Job	Description
<u>3611</u>	MOTOR EQUIPMENT OPERATOR
<u>3612</u>	MOTOR EQUIPMENT REPAIRMAN
<u>0014</u>	MOTOR VEHICLE EXCISE ASSISTANT
<u>4302</u>	MUNICIPAL GROUP MAINT COORDINA
<u>4303</u>	MUNICIPAL GROUP MAINTENANCE
<u>2221</u>	MUNICIPAL ZONE CHIEF
<u>2222</u>	MUNIS BUSINESS PROC COORD
<u>1710</u>	MUNIS PROJECT COORDINATOR
<u>2223</u>	MUNIS PROJECT DIRECTOR
<u>2436</u>	NATURAL RESOURCE MANAGER
<u>1912</u>	NEIGHBORHOOD COORDINATOR
<u>1913</u>	NEIGHBORHOOD COORDINATOR SEPCI
<u>6741</u>	NON BARG WRKERS COMP
<u>6314</u>	NON CONF ADM ASST B1
<u>6315</u>	NON CONF ADM ASST B2
<u>4945</u>	NON CONTRIBUTORY RETIREE
<u>3412</u>	NURSE PRACTITIONER
<u>6734</u>	NURSING
<u>6114</u>	OCCUPATIONAL PHYSICAL THERPST
<u>0525</u>	OFFICE MANAGER INSPECT SERVS
<u>0510</u>	OFFICE MANAGER NON BARGAINING
<u>3621</u>	OIL BURNER TECHNICIAN
<u>5413</u>	OIL BURNER TECHNICIAN
<u>1021</u>	OPERATIONS MANAGER
<u>1004</u>	OPERATIONS MANAGER-40 HRS
<u>1927</u>	ORAL HEALTH PROG COORDINATOR
<u>9867</u>	ORDINARY DISABILITY NON JOB
<u>2224</u>	ORGANIZATIONAL DEV COORDINATO
<u>1931</u>	OUTREACH COORDINATOR
<u>1928</u>	OUTREACH LIASON
<u>1905</u>	OUTREACH WORKER
<u>1016</u>	PAGE
<u>8861</u>	PARA ENRICHMENT 1
<u>8862</u>	PARA ENRICHMENT 2
<u>8863</u>	PARA ENRICHMENT 3
<u>8864</u>	PARA ENRICHMENT 4
<u>8865</u>	PARA ENRICHMENT 5
<u>8866</u>	PARA ENRICHMENT 6
<u>6709</u>	PARA SUSPENSE
<u>6790</u>	PARA UNION REPRESENTATIVES
<u>1711</u>	PARALEGAL
<u>6458</u>	PARENT FACILITATOR
<u>5713</u>	PARENT HELPER

JOB CLASS
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Job	Description
4320	PARK FOREMAN
1934	PARK NATURALIST
0013	PAYROLL ACTS PAYABLE CLERK
0007	PAYROLL CLERK
0008	PAYROLL CONTROL ANALYST
1611	PAYROLL COORDINATOR
2111	PAYROLL DIRECTOR
0527	PAYROLL HR INFORMATION COORDIN
2110	PAYROLL MANAGER
0511	PBRM OFFICE SERV COORD
4949	PENSION COMMISSIONER
1736	PENSION DIR OF MEMBER SVCS
1734	PENSION DISTRIBUTION ADMINISTR
1723	PENSION FUNDS ANALYST
2225	PERSONNEL ANALYST
0528	PERSONNEL DATA AND SYSTEM ADM
2231	PERSONNEL GENERALIST
2109	PERSONNEL PAYROLL MANAGER
2260	PH EMER PREP & RESPONSE COORD
3213	PHOTO IDTECHNICIAN
3622	PLUMBER
5415	PLUMBER
3625	PLUMBING GASFITTING INSPECTOR
2908	POLICE CADET
2903	POLICE CAPTAIN
2901	POLICE COMMISSIONER
2910	POLICE DISPATCHER
2904	POLICE LIEUTENANT
2902	POLICE OFFICER
2905	POLICE SERGEANT
6162	PRE K
4902	PRESIDENT CITY COUNCIL
5844	PRINCIP ALTERTV SCH
5434	PRINCIPAL
2100	PRINCIPAL ACCOUNTANT
5427	PRINCIPAL CLERK TYPIST
3401	PRINCIPAL PLANNER
0529	PROCEDURES CLERK
0009	PROCUREMENT CLERK
1916	PROGRAM COORDINATOR
2412	PROGRAM MANAGER
1917	PROJECT ASSISTANT
2414	PROJECT DIRECTOR



JOB CLASS
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<b>Job</b>	<b>Description</b>
<u>2415</u>	PROJECT MANAGER
<u>5993</u>	PROJECT MANAGER
<u>6460</u>	PSYCHOLOGIST UNIT A
<u>2809</u>	PUBLIC HEALTH COMMISSIONER DP
<u>4313</u>	PUBLIC WORKS MAINTENANCE MAN
<u>5071</u>	PUPIL SERVICES LEADER
<u>0010</u>	PURCHASING AGENT
<u>6232</u>	READING FIRST TEACHER
<u>0011</u>	REAL ESTATE ANALYST
<u>0012</u>	REAL ESTATE ANALYST SENIOR
<u>0530</u>	RECORDS CLERK
<u>1712</u>	RECREATION COORDINATOR
<u>4905</u>	RECREATION LEADER HEAD
<u>5411</u>	RECREATION LEADERS
<u>4608</u>	RECREATION SUPERVISOR DISTRIC
<u>3613</u>	RECYCLING COLLECTOR
<u>1721</u>	RECYCLING ENFORCEMENT COORD
<u>2427</u>	REFERENCE LIBRARIAN
<u>1932</u>	REFUND COORDINATOR
<u>5767</u>	REGULAR BUS MONITOR
<u>3403</u>	REHAB CONSTRUCTION SPECIALIST
<u>3404</u>	REHABILITATION SUPERVISOR
<u>1617</u>	RESIDENTIAL APPRAISER
<u>6107</u>	RESP CLASSROOM RESC TEACHER
<u>4950</u>	RETIREE
<u>4951</u>	RETIREE
<u>9872</u>	RETIREMENT 872
<u>1722</u>	RETIREMENT COUNSELOR
<u>1605</u>	RETIREMENT FINANCIAL AUDITOR
<u>1001</u>	RETIREMENT PART TIME CLERK
<u>2226</u>	RISK PREVENTION MANAGER
<u>5024</u>	ROTC
<u>6789</u>	S06 REPS
<u>6798</u>	SAFE EXEC DIRECTOR
<u>2227</u>	SAFETY INSPECTOR
<u>6452</u>	SCH BLDNG COORDINATOR
<u>5435</u>	SCHOOL COMMITTEE
<u>6336</u>	SCHOOL IMPROVEMENT OFFICER
<u>5542</u>	SCHOOL NURSE
<u>5543</u>	SCHOOL NURSE PER DIEM
<u>5544</u>	SCHOOL NURSE-SUBSTITUTE
<u>2249</u>	SCHOOL STAT SENIOR ANALYST
<u>8999</u>	SCHOOL TERMINATED

JOB CLASS
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Job	Description
<u>2810</u>	SEALER OF WEIGHTS MEASURES
<u>4613</u>	SEASONAL GROUNDS WORKER
<u>4610</u>	SEASONAL TOLL BOOTH ATTENDANT
<u>0512</u>	SECRETARY
<u>5440</u>	SECURITY
<u>5039</u>	SEI GR 2
<u>1918</u>	SENIOR CENTER OUTREACH WORKER
<u>1006</u>	SENIOR CENTER SENIOR CLERK
<u>2113</u>	SENIOR FINAN ANYST PROJ MGR
<u>2219</u>	SENIOR PLANNER GIS MANAGER
<u>2102</u>	SENIOR ACCOUNTANT
<u>4972</u>	SENIOR AIDE
<u>3204</u>	SENIOR APPLICATION DEVELOPER
<u>2416</u>	SENIOR CENTER DIRECTOR
<u>2419</u>	SENIOR CENTER EMPLOYMENT DIR
<u>5428</u>	SENIOR CLERK TYPIST
<u>5417</u>	SENIOR CUSTODIAN
<u>1612</u>	SENIOR FINANCIAL ACCOUNTANT
<u>2114</u>	SENIOR FINANCIAL ANALYST- NF
<u>1607</u>	SENIOR FINANCIAL INFO SPEC
<u>2232</u>	SENIOR LEGAL COUNSEL
<u>6366</u>	SENIOR MANAGEMENT
<u>6396</u>	SENIOR MANAGEMENT
<u>1727</u>	SENIOR NETWORK ANALYST
<u>3402</u>	SENIOR PLANNER
<u>2413</u>	SENIOR PROGRAM MANAGER
<u>1724</u>	SENIOR PROJ MANAGER PARKS
<u>2417</u>	SENIOR PROJECT MANAGER
<u>3205</u>	SENIOR SYSTEMS DEVELOPER
<u>2112</u>	SENIOR TREASURY ANALYST
<u>3623</u>	SHEET METAL WORKER
<u>5416</u>	SHEET METAL WORKER
<u>2418</u>	SHINE COORDINATOR
<u>4614</u>	SKATING GUARDS
<u>4329</u>	SKATING RINK MAINTENANCE MAN
<u>2817</u>	SKATING RINK MANAGER
<u>4616</u>	SNOW ROUTE INSPECTOR
<u>2716</u>	SOLID WASTE MANAGER
<u>5171</u>	SPECIAL EDUCATION
<u>1726</u>	SPECIAL PROJECTS MANAGER
<u>5449</u>	SPECIALIST
<u>5816</u>	SPECIALIST
<u>5674</u>	SPED 1 ON 1

JOB CLASS
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Job	Description
6533	SPED BUS MONITOR
5380	SPED PARAPROFESSIONAL
5070	SPEECH LANGUAGE
6747	SR ADMIN LEAD SEL CAREER DEVEL
5995	SR ADMINISTRATOR
6733	SR ANALYST
2120	SR MANAGEMENT ANALYST
1608	SR PAYROLL ANALYST
4970	SR PAYROLL BENEFITS ANALYST
3628	SR PLUM GASFIT INSP
2257	SR QA QI ANALYST
3206	SR WEB DEVELOPER
0539	STAFF ASSISTANT TO EXEC. DIR.
0501	STATISTICAL ANALYST TECH
3624	STEAMFITTER
5418	STEAMFITTER
1713	STOREKEEPER
1714	STOREKEEPER SENIOR
1717	STORES CONTROL SUPERVISOR
4328	STREETS ENGINEERING FOREMAN
2717	STREETS MAINTENANCE MANAGER
5710	STUDENT ADULT HELPER
6579	STUDENT HELPER
5768	SUBSTITUTE
9862	SUPERANNUATION REGULAR
9863	SUPERANNUATION REGULAR
9857	SUPERANNUATION SURVIVORS
5442	SUPERINTENDENT
5682	SUPERVISOR
6399	SUPERVISOR
5265	SUPERVISOR (S27)
6777	SUPERVISOR LC ELA READ
9861	SUPPERANNUATION REGULAR
6403	SUPPORT STAFF
2428	SUPV OF BORROWERS SERVICE
2429	SUPV YOUTH OUTREACH SERV
9866	SURVIVORS OF ACC DIS
9869	SURVIVORS OF ACC DIS RETIREES
9865	SURVIVORS OF ACTIVE MEMBERS
9864	SURVIVORS OF OPT
1005	SYSTEM SUPPORT SPECIALIST
8851	TEACHER ENRICHMENT 1
9087	TEACHER MEDICAL

JOB CLASS
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Job	Description
<u>6415</u>	TEACHER SUSPENSE
<u>8852</u>	TEACHER TUTOR
<u>5456</u>	TECHNICIAN
<u>3207</u>	TELECOMMUNICATIONS TECHNICIAN
<u>5812</u>	TELEPHONE TECHNICIAN
<u>5410</u>	TEMPORARY CUSTODIAN
<u>4618</u>	TENNIS HOUSE ATTENDANT
<u>TEST</u>	TEST
<u>4604</u>	THERAPEUTIC PROGRAM DIRECTOR
<u>1729</u>	THERAPEUTIC REC SPECIALIST
<u>1732</u>	THERAPEUTIC REC COORDINATOR
<u>4600</u>	THERAPEUTIC RECR LEADER HEAD
<u>4606</u>	THERAPEUTIC RECREATION LEADER
<u>1906</u>	TOBACCO EDUCATOR ADVOCATE
<u>0531</u>	TOLL COLLECTOR
<u>4317</u>	TRAFFIC ENGINEERING FOREMAN
<u>3615</u>	TRAFFIC SIGNAL TECHNICIAN
<u>2430</u>	TRAINING LIBRARIAN
<u>2116</u>	TREASURY ANALYST
<u>4104</u>	TREE CLIMBER SURGEON
<u>5488</u>	TUTOR
<u>5487</u>	TUTOR-FORWARD 5 SITE TUTOR
<u>4100</u>	VAN DRIVER
<u>1921</u>	VETERANS SERVICE INVESTIGATOR
<u>3414</u>	VETERINARY ASSISTANT
<u>1930</u>	VIOLENCE PREVENTION COORD
<u>0532</u>	VITAL RECORDS CLERK
<u>5891</u>	VOC CULINARY ARTS INCLUSION
<u>6593</u>	VOC PROJECTS COORDINATOR
<u>5253</u>	VOCATIONAL
<u>1023</u>	VOLUNTEER & SPEC PROJECTS COOR
<u>1728</u>	WAREHOUSE FOREMAN
<u>1735</u>	WASTE COMPLIANCE SPECIALIST
<u>4615</u>	WATER SAFETY DIRECTOR
<u>4607</u>	WATER SAFETY DIRECTOR ASST
<u>5925</u>	WEBMASTER
<u>2811</u>	WEIGHTS MEASURES DPTY SEALER
<u>3614</u>	WELDER
<u>3626</u>	WIRE INSPECTOR
<u>3627</u>	WIRE INSPECTOR SENIOR
<u>4314</u>	WK FOREMAN BLDG MAIN MAN DPW
<u>1719</u>	WORK ORDER ADMINISTRATOR
<u>4323</u>	WORKING FOREMAN DPW

JOB CLASS
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<b>Job</b>	<b>Description</b>
<u>4325</u>	WORKING FOREMAN GARDNER
<u>4326</u>	WORKING FOREMAN M E R
<u>4105</u>	WORKING FOREMAN TREE SURGEON
<u>3112</u>	WORKING FOREMAN, FIRE
<u>4315</u>	WORKING MAINTENANCE FOREMAN
<u>2431</u>	YOUNG ADULT LIBRARIAN
<u>1738</u>	YOUTH DEVELOPMENT SUPERVISOR
<u>5423</u>	ZONE CHIEF
<u>6395</u>	ZONE CHIEF
<u>2228</u>	ZONING ADMINISTRATOR
<u>3408</u>	ZONING CODE INSPECTOR
<u>1715</u>	ZOO ATTENDANT
<u>2229</u>	ZOO COORDINATOR

## Report B: Job Location

<b>JOB LOCATION</b>
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Loc	Short Desc	Long Description
C108	CAP ASSETS	CAPITAL ASSETS
C111	COUNCIL	CITY COUNCIL
C112	SCHOOL COM	SCHOOL COMMITTEE
C121	MAYOR	MAYORS OFFICE
C129	CAFO	CHIEF ADMIN FIN OFFICE
C132	311	311 CALL CENTER
C133	FINANCE	FINANCE
C134	CSTAT	CITISTAT
C135	COMPT	COMPTROLLERS
C136	AUDITORS	INTERNAL AUDIT
C138	PROCURE	PROCUREMENT, OFFICE OF
C141	ASSESSORS	ASSESSORS
C145	TRES	TREASURER
C146	COLLECT	COLLECTOR
C149	RETIREMENT	RETIREMENT
C151	LAW	LAW
C152	PERSONNEL	PERSONNEL
C154	PAYROLL	PAYROLL
C155	ITD	INFORMATION TECHNOLOGY
C161	CLERK	CITY CLERK
C162	ELECTIONS	ELECTIONS
C175	ECODEV	PLANNING ECONOMIC DEV
C180	COMDEV	COMMUNITY DEVELOPEMENT
C199	LABOR REL	LABOR RELATIONS
C241	BUILDING	BUILDING
C242	HOUSING	HOUSING
C292	TJO	TJO ANIMAL CONTROL
C520	HEALTH	HEALTH
C543	VETERANS	VETERANS
C590	MCDI	MCDI
C999	CONVERTED	CONVERTED EMPLOYEES
CEF1	ELDER AFFA	ELDER AFFA
CEF2	ELDER AFFA	ELDER AFFA
CEF3	ELDER AFFA	ELDER AFFA
CFOE	FIRE E1	FIRE ENGINE 1
CF0L	FIRE L1	FIRE L1
CF1E	E3 OAKLAND	E3 OAKLAND
CF1L	L3 OAKLAND	L3 OAKLAND
CF2E	E5 INDIAN	E5 INDIAN
CF2L	L5 INDIAN	L5 INDIAN
CF3E	E8 MASON	E8 MASON
CF3L	L8 MASON	L8 MASON
CF48	FIRE HQ	FIRE HEADQUARTERS

**JOB LOCATION**

<b>Loc</b>	<b>Short Desc</b>	<b>Long Description</b>
CF49	DISPATCH	DISPATCH
CF4E	E9 CAREW	E9 CAREW
CF4L	L9 CAREW	L9 CAREW
CF5E	E10	E10
CF60	REPAIR	REPAIR
CF61	FIRE 61 EP	FIRE 61 EP
CF62	TRAINING	TRAINING
CF63	FIRE RES	FIRE RESCUE SQUAD
CF64	PREVENTION	PREVENTION
CF65	ALARM	ALARM
CF66	ARSON	ARSON
CF6E	E12 16 A	E12 16 A
CF7E	E16 MASSRE	E16 MASSRE
CF93	RESCUE	RESCUE
CP01	POLICE REG	POLICE REG
CP02	POLICE ADM	POLICE ADM
CP03	POLICE	POLICE
CP04	POLICE	POLICE
CP05	POLICE	POLICE
CP06	POLICE	POLICE
CP07	POLICE IT	POLICE INFORMATION TECHNOLOGY
CP08	POL COMM A	POLICE COMMUNICATION CENTER A
CP09	POL COMM B	POLICE COMMUNICATION CENTER B
CP10	POL COMM C	POLICE COMMUNICATION CENTER C
CP11	POL FIS PE	POLICE FISCAL PERSONNEL
CP12	POL FLEET	POLICE FLEET
CP13	POL GRANT	POLICE GRANTS AND PLANNING
CP14	POL CA	POLICE CRIME ANALYSIS
CP15	POL SUPPLY	POLICE SUPPLY EXTRA DETAIL
CP16	POL SQD A	POLICE SQUAD A
CP17	POL SQD B	POLICE SQUAD B
CP18	POL SQD C	POLICE SQUAD C
CP19	POL CI A	POLICE CRIMINAL INVEST A
CP20	POL CI B	POLICE CRIMINAL INVEST B
CP21	POL CI C	POLICE CRIMINAL INVEST C
CP22	POL JUV A	POLICE JUVENILE DV SQUAD A
CP23	POL JUV B	POLICE JUVENILE DV SQUAD B
CP24	POL JUV C	POLICE JUVENILE DV SQUAD C
CP25	POL JUV SS	POLICE JUVENILE STUDENT SUPPOR
CP26	POL VICE B	POLICE VICE CONTROL UNIT B
CP27	POL VICE C	POLICE VICE CONTROL UNIT C
CP28	POL IN IV	POLICE INTERNAL INVESTIGATION
CP29	POL CIB B	POLICE CIB SQUAD B



**JOB LOCATION**

<b>Loc</b>	<b>Short Desc</b>	<b>Long Description</b>
CP30	POL TRAF B	POLICE TRAFFIC SQUAD B
CP31	POL ST CRI	POLICE STREET CRIMES
CP32	POL PROP	POLICE PROPERTY
CP33	POL COURT	POLICE COURT
CP34	POL SP V B	POLICE SPECIAL VICTIMS UNIT B
CP35	POL SP V C	POLICE SPECIAL VICTIMS UNIT C
CPB1	FAC ADMIN	FACILITIES ADMINISTRATION
CPB2	FAC CUST	FACILITIES CUSTODIAL
CPB3	FAC TRADES	FACILITIES TRADES
CPKA	PK ADMIN	PARK ADMINISTRATION
CPKB	PK TENNIS	PARK TENNIS
CPKC	PK BBALL	PARK BASKETBALL
CPKD	P MAINT	P MAINT
CPKE	PK TOLL	PARK TOLL BOOTH
CPKF	PK YARD	PARK YARD
CPKG	PK F & H	PARK FORESTRY & HORT
CPKH	PK ZOO	PARK ZOO
CPKJ	PK REC	PARK RECREATION
CPKK	CLEAN CITY	CLEAN CITY
CPKL	PK D 1	PARK DISTRICT 1
CPKM	CYR ARENA	PARK CYR ARENA
CPKN	PK D 3	PARK DISTRICT 3
CPKP	PK D 4	PK DISTRICT 4
CPKQ	PK BN/ATH	PARK BRIGHT NIGHTS/ATHLETIC
CPKR	FOREST PK	FOREST PARK
CPKS	P MAINT	P MAINT
CPKT	VET GOLF	VETERANS GOLF COURSE
CPKU	FR GOLF	FRANCONIA GOLF COURSE
CPKV	CARRIAGE	CARRIAGE HOUSE
CPKW	PK REC LDR	PARK REC LEADERS
CPKX	PK LIFEGRD	PARK LIFEGUARDS
CPKY	PK TH LDR	PARK THERAPEUTIC LEADERS
CPLA	LIB-CENTR	LIBRARY-CENTRAL
CPLB	LIB-BRIGHT	LIBRARY-BRIGHTWOOD
CPLC	LIB-ES FP	LIBRARY-E FOREST PK
CPLD	LIB-E SPR	LIBRARY-EAST SPRINGFIELD
CPLE	LIB-FOR PK	LIBRARY-FOREST PARK
CPLF	LIB-INDIAN	LIBRARY-INDIAN ORCHARD
CPLG	LIB-LIBERT	LIBRARY-LIBERTY
CPLH	LIB-MASON	LIBRARY-MASON SQUARE
CPLI	LIB-PP	LIBRARY-PINE POINT
CPLJ	LIB-16 ACR	LIBRARY-SIXTEEN ACRES
CPLK	LIBRARY	LIBRARY

**JOB LOCATION**

<b>Loc</b>	<b>Short Desc</b>	<b>Long Description</b>
<u>CPLL</u>	LIBRARY	LIBRARY
<u>CPW0</u>	ADMIN	ADMIN
<u>CPW1</u>	SOLIDWASTE	SOLIDWASTE
<u>CPW2</u>	ENGINEER	ENGINEER
<u>CPW3</u>	STREETS	STREETS
<u>CPW4</u>	FLEET M	FLEET M
<u>CPW5</u>	TRAFFIC	TRAFFIC
<u>RUNK</u>	RET UNKNWN	RETIRED UNKNOWN LOCATION
<u>TERM</u>	TERM	TERM
<u>UNKN</u>	UNKNOWN	UNKNOWN
<u>Y001</u>	BEN ONLY	BENEFITS ONLY
<u>YC01</u>	CITY BEN	CITY BENEFIT ONLY
<u>YS01</u>	SCH BENEF	SCHOOL BENEFIT ONLY
<u>Z001</u>	PENS EMQ	PENSION EMQ
<u>Z002</u>	NON CONTRI	NON CONTRIBUTORY RETIREE
<u>Z301</u>	PENS ER1	PENSION ER1

## Report C: Group Bargaining Unit/Union

GROUP BARGAINING UNIT/UNION
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Group/BU Code	Short Desc	Long Description
BUNK	BEN UNK	BENEFIT ONLY - UNKNOWN
C01	NB STANDRD	NON BARGAINING-STANDARD
C01E	NB ELECTED	NON BARGAINING-ELECTED
C01P	CADETS	NON BARG POL CADETS
C01R	TEMP REMOV	TEMPORARY REMOVAL FROM C01
C01S	NB SEASNL	NON BARGAINING-SEASONAL
C01T	NB TEMP	NON BARGAINING-TEMPORARY
C01U	PENDING UN	PENDING SEIU UNIONIZATION
C03	AFSCM1596B	UNITED PUBLIC SVC EMPLOYEES UN
C07	IAFF 648	FIREFIGHTERS IAFF 648
C08	AFSCM1596A	AFSCME #1596A LIBRARY EMPLOYEE
C10	FIRE CHIEF	FIRE CHIEF ASSOC. OF SPFLD
C13	BRHD POLIC	INTNL. BROTHERHOOD OF POLICE
C20	UFCW	UNITED FOOD COMMERCIAL
C23	AFSCME3065	AFSCME LOCAL 3065 (FOREMAN)
C24	ENGRS 888	ENGRS SEIU 888
C26	SP BLDG TR	SPRFLD PUBLIC BLDG TRADE ASSOC
C28	POLIC SPVR	POLICE SUPERVISORS SPSA
C31	SP LBR EMP	SPGFLD ORG LIBRARY EMPLOYEES
C40	SP BLD INS	SPGFLD BUILDING INSPECTORS
C51	SP HLTH NR	SPGFLD COMM HEALTH NURSES
CO1P	CADETS	NON BARD POL CADETS
CUNK	CITY UNK	CITY - UNKNOWN
RUNK	RET UNK	RETIREMENT - UNKNOWN
TUNK	TERM UNK	TERMINATED - UNKNOWN
UNK	UNKNOWN	UNKNOWN - NOT IN APD
Z	MB	MISC BILLING
ZNON	NON CONTRI	NON CONTRIBUTORY RETIREE

## Report E: Check Location

CHECK LOCATION
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<b>Loc</b>	<b>Name</b>
D100	MAYOR'S OFFICE
D101	FINANCE
D102	PERSONNEL
D103	PURCHASE
D104	AUDITORS
D105	TREASURERS
D106	CLERK'S OFFICE
D107	COLLECTORS
D108	CAPITAL ASSETS
D109	CITY STAT
D110	ELECTIONS
D111	LAW OFFICE
D112	RETIREMENT
D113	VETERANS
D114	ASSESSORS
D115	IT
D116	CITY COUNCIL ADMIN
D117	FACILITIES MANAGEMENT
D118	C.A.F.O.
D119	INTERNAL AUDIT
D120	PAYROLL
D128	CENTRAL LIBRARY
D129	BRIGHTWOOD LIBRARY BRANCH
D130	E. FOREST PARK LIBRARY BRANCH
D131	E. SPRINGFIELD LIBRARY BRANCH
D132	FOREST PARK LIBRARY BRANCH
D133	INDIAN ORCHARD LIBRARY BRANCH
D134	LIBERTY LIBRARY BRANCH
D135	MASON SQUARE LIBRARY BRANCH
D136	PINE POINT LIBRARY BRANCH
D137	SIXTEEN ACRES LIBRARY BRANCH
D147	FIRE HQ
D148	FIRE ADMINISTRATION
D149	FIRE DISPATCH
D150	FIRE STATION 1 HQ
D151	FIRE STATION 3 OAKLAND STREET
D152	FIRE STATION 3 INDIAN ORCHARD
D153	FIRE STATION 8 MASON ROAD
D154	FIRE STATION 9 CREW STREET
D155	FIRE STATION 10 NORTH END
D156	FIRE STATION 12 SIXTEEN ACRES
D157	FIRE STATION 14 SUMNER AVE
D158	FIRE STATION 15 PAGE VOULIVARD

CHECK LOCATION
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<b>Loc</b>	<b>Name</b>
D159	FIRE STATION 16 MASSRECO STREE
D160	FIRE REPAIR SHOP
D161	FIRE EMERGENCY PREPAREDNESS
D162	FIRE TRAINING CENTER
D163	FIRE RESCUE SQUAD
D164	FIRE PREVENTION
D165	FIRE ALARM
D166	FIRE ARSON SQUAD
D174	FACILITIES ADMINISTRATION
D175	PARK DEPARTMENT - TOLL BOOTH
D176	PARK ADMINISTRATION
D177	YARD
D178	FORESTRY
D179	ZOO
D180	PARK RECREATION
D181	CLEAN CITY
D182	DISTRICT 1
D183	PARK CYR ARENA
D184	DISTRICT 3
D185	DISTRICT 4
D186	BRIGHT NIGHTS/ATHLETIC
D187	FOREST PARK
D188	FAC TRADES
D189	VETERANS GOLF COURSE
D190	FRANCONIA
D191	CARRIAGE HOUSE
D192	RECREATION LEADERS
D193	LIFEGUARDS
D194	THERAPEUTIC LEADERS
D197	DPW ADMINISTRATION
D198	DPW ENGINEERING
D199	DPW FLEET MAINTENANCE
D200	DPW SOLID WASTE
D201	DPW STREET & SERVICES
D202	DPW TRAFFIC
D203	ANIMAL CONTROL
D208	POLICE
D213	POLICE
D214	POLICE
D215	POLICE
D216	POLICE
D217	POLICE
D218	POLICE INFORMATION TECHNOLOGY

CHECK LOCATION
----------------

<b>Loc</b>	<b>Name</b>
<u>D219</u>	POLICE COMMUNICATIONS CTR A
<u>D220</u>	POLICE COMMUNICATIONS CTR B
<u>D221</u>	POLICE COMMUNICATIONS
<u>D222</u>	POLICE FISCAL AND PERSONNEL
<u>D223</u>	POLICE FLEET
<u>D224</u>	POLICE GRANTS AND PLANNING
<u>D225</u>	POLICE CRIME ANALYSIS
<u>D226</u>	POLICE SUPPLY AND EXTRA DETAIL
<u>D227</u>	POLICE SQUAD A
<u>D228</u>	POLICE SQUAD B
<u>D229</u>	POLICE SQUAD C
<u>D230</u>	POLICE CRIMINL INVESTIGATION A
<u>D231</u>	POLICE CRIMINL INVESTIGATION B
<u>D232</u>	POLICE CRIMINL INVESTIGATION C
<u>D233</u>	POLICE JUVENILE DV SQUAD A
<u>D234</u>	POLICE JUVENILE DV SQUAD B
<u>D235</u>	POLICE JUVENILE DV SQUAD C
<u>D236</u>	POLICE JUVENILE STUDENT SUPPT
<u>D237</u>	POLICE VICE CONTROL UNIT B
<u>D238</u>	POLICE VICE CONTROL UNIT C
<u>D239</u>	POLICE INTERNAL INVESTIGATION
<u>D240</u>	POLICE CIB SQUAD B
<u>D241</u>	POLICE TRAFFIC SQUAD B
<u>D242</u>	POLICE STREET CRIMES
<u>D243</u>	POLICE PROPERTY
<u>D244</u>	POLICE COURT
<u>D245</u>	POLICE SPECIAL VICTIMS UNIT B
<u>D246</u>	POLICE SPECIAL VICTIMS UNIT C
<u>D256</u>	ELDER AFFAIRS
<u>D266</u>	HEALTH & HUMAN SERVICES
<u>D267</u>	COMMUNITY DEVELOPMENT
<u>D268</u>	CODE ENFORCEMENT-HOUSING
<u>D269</u>	OFFICE OF PLANNING & ECO DEV
<u>D270</u>	CODE ENFORCEMENT BUILDING DIV.
<u>D300</u>	CITY COUNCIL
<u>D301</u>	SCHOOL COMMITTEE
<u>D999</u>	BENEFIT ONLY LOCATION
<u>TERM</u>	TERMINATED EMPLOYEES
<u>W2DN</u>	W-2'S THAT HAVE BEEN REPRINTED
<u>W2HL</u>	W2'S HELD
<u>W2PR</u>	W2'S NEEDING REPRINTING
<u>Z002</u>	NON CONTRIBUTORY RETIREE



## Report F: TLM Information

## 1. TLM Departments

TLM DEPARTMENTS
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Type	Code	Short Desc	Long Desc
USER DEFINED CODES	C132	311 CALL	311 CALL CENTER
USER DEFINED CODES	C917	AMC	ANIMAL CONTROL
USER DEFINED CODES	C026	CAC	CAPITAL ASSET CONSTRUCTION
USER DEFINED CODES	C129	C.A.F.O.	CHIEF ADMIN FINANCIAL OFFICER
USER DEFINED CODES	C090	ASSESSORS	CITY ASSESSORS
USER DEFINED CODES	C030	CITY CLERK	CITY CLERKS OFFICE
USER DEFINED CODES	C070	COLLECTOR	CITY COLLECTORS
USER DEFINED CODES	C140	PLANNING	CITY PLANNING BOARD
USER DEFINED CODES	C080	TREASURERS	CITY TREASURERS
USER DEFINED CODES	C160	CITYSTAT	CITYSTAT
USER DEFINED CODES	C240	CODE ENFOR	CODE ENFORCEMENT
USER DEFINED CODES	C243	CODE ENFOR	CODE ENFORCEMENT
USER DEFINED CODES	C242	CODE ENFOR	CODE ENFORCEMENT-WEIGHTS AND M
USER DEFINED CODES	C024	CD PLAN	COMM DEV PLAN MANAGEMENT
USER DEFINED CODES	C911	ADMIN	DPW ADMINISTRATION
USER DEFINED CODES	C913	ENGINEER	DPW ENGINEERING
USER DEFINED CODES	C915	FLEET M	DPW FLEET MAINTENANCE
USER DEFINED CODES	C912	SOLIDWASTE	DPW SOLID WASTE
USER DEFINED CODES	C914	STREETS	DPW STREETS - SERVICES
USER DEFINED CODES	C918	TRAFFIC	DPW TRAFFIC
USER DEFINED CODES	C165	ELDER AFFA	ELDER AFFAIRS MATURE
USER DEFINED CODES	C163	ELDER AFFA	ELDER AFFAIRS GENERAL
USER DEFINED CODES	C164	ELDER AFFA	ELDER AFFAIRS GRANT
USER DEFINED CODES	C040	ELECTION	ELECTION COMMISSION
USER DEFINED CODES	C025	FINANCE	FINANCE DEPT
USER DEFINED CODES	C401	FIRE ADM	FIRE ADMINISTRATION
USER DEFINED CODES	C290	HEALTH DEP	HEALTH DEPARTMENT
USER DEFINED CODES	C291	HEALTH GRN	HEALTH GRANTS
USER DEFINED CODES	C060	IT DEPT	INFORMATION TECHNOLOGY DEPT
USER DEFINED CODES	C051	INTERNAL A	INTERNAL AUDIT
USER DEFINED CODES	C131	LABOR REL	LABOR RELATIONS
USER DEFINED CODES	C100	LAW DEPT	LAW DEPARTMENT
USER DEFINED CODES	C280	LIBRARY	LIBRARY
USER DEFINED CODES	C962	MASS CAREE	MASS CAREER DEVL INST
USER DEFINED CODES	C102	MAYOR'S OF	MAYORS OFFICE
USER DEFINED CODES	C050	COMPTROLLE	OFFICE OF THE COMPTROLLER
USER DEFINED CODES	C715	CARRIAGE	PARK DEPARTMENT-CARRIAGE HOUSE
USER DEFINED CODES	C703	ZOO	PARK DEPARTMENT-ZOO
USER DEFINED CODES	C705	CLEAN CITY	PARKS CLEAN CITY
USER DEFINED CODES	C710	GROUNDS	PARKS DEPARMENT GROUNDS
USER DEFINED CODES	C707	PARK	PARKS DEPARTMENT
USER DEFINED CODES	C702	P F-H	PARKS DEPARTMENT-FOREST - HORT

USER DEFINED CODES	C714	GOLF	PARKS DEPARTMENT-GOLF
USER DEFINED CODES	C701	P MAINT	PARKS DEPARTMENT-MAINTENANCE
USER DEFINED CODES	C700	P OFFICE	PARKS DEPARTMENT-OFFICE
USER DEFINED CODES	C726	POOLS	PARKS DEPARTMENT-POOLS
USER DEFINED CODES	C704	REC DEPT	PARKS DEPARTMENT-REC DEPT
USER DEFINED CODES	C712	TOLL	PARKS DEPARTMENT-TOLL
USER DEFINED CODES	C023	PAYROLL	PAYROLL DEPARTMENT
USER DEFINED CODES	C130	PERSONNEL	PERSONNEL DEPARTMENT
USER DEFINED CODES	C314	BLDG ADMIN	PUBLIC BUILDINGS
USER DEFINED CODES	C310	BUILDINGS	PUBLIC BUILDINGS-ADMIN
USER DEFINED CODES	C316	BLDG MAINT	PUBLIC BUILDINGS-MAINTENANCE
USER DEFINED CODES	C150	PURCHASE	PURCHASE DEPARTMENT
USER DEFINED CODES	C173	RETIREMENT	RETIREMENT
USER DEFINED CODES	C360	VETERANS S	VETERANS SERVICE

## 2. TLM Pay Rules

TLM PAY RULES
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Type	Code	Short Desc	Long Desc
USER DEFINED CODES	P101	NU HRLY FT	NON UNION HOURLY FT
USER DEFINED CODES	P102	NU HRLY PT	NON UNION HOURLY PT
USER DEFINED CODES	P103	NU SLRY FT	NON UNION SALARY FT
USER DEFINED CODES	P104	1596B CL45	U 1596B CLERICAL PT 45MIN
USER DEFINED CODES	P105	NU HR FT N	NON UNION HOURLY FT NO HOL
USER DEFINED CODES	P107	1596LIBF10	U 1596A LIB FT 10HR
USER DEFINED CODES	P108	1596LIBF8H	U 1596A LIB FT 8 HR
USER DEFINED CODES	P109	1596LIB PT	U 1596A LIB PT
USER DEFINED CODES	P110	1596LIBT10	U 1596A LIB TM 10HR
USER DEFINED CODES	P111	1596LIBT75	U 1596A LIB TM 7.5 HR
USER DEFINED CODES	P112	1596B CLFT	U 1596B CLERICAL FT
USER DEFINED CODES	P113	1596B CLPT	U 1596B CLERICAL PT
USER DEFINED CODES	P114	FORE 10:45	U 3065 FOREMAN 10 45
USER DEFINED CODES	P115	FORE 8:30	U 3065 FOREMAN 8 30
USER DEFINED CODES	P122	U888CIVENG	U 888 CIVIL ENGINEER
USER DEFINED CODES	P123	UBLDINSPEC	U BLDG INSPEC ASSOC
USER DEFINED CODES	P124	ULIBCLKF10	U LIBR CLRK FT 10 HR
USER DEFINED CODES	P125	ULIBCLKF8H	U LIBR CLRK FT 8 HR
USER DEFINED CODES	P126	ULIBCLKP10	U LIBR CLRK PT 10 HR
USER DEFINED CODES	P127	ULIBCLKP75	U LIBR CLRK PT 7.5 HR
USER DEFINED CODES	P129	U PUB BLDG	U PUB BLDG TRADESMAN
USER DEFINED CODES	P130	U PUB NURS	U PUB HEALTH NURSES
USER DEFINED CODES	P131	USAMEDPWFT	U SAME DPW FT
USER DEFINED CODES	P132	USAMEDPWG	U SAME DPW GARAGE FT
USER DEFINED CODES	P133	U SAME OTH	U SAME OTHER
USER DEFINED CODES	P134	U SAME SOL	U SAME SOLIDWASTE 10 HR
USER DEFINED CODES	P135	U SAME TRU	U SAME TRUCK DRIVERS
USER DEFINED CODES	P142	U SAME PAR	U SAME PARKS 8 HR 30 MIN
USER DEFINED CODES	P143	U 3065 PAR	U 3065 PARKS 7.5 45 MIN
USER DEFINED CODES	P144	U 3065 PAR	U 3065 PARKS 8 30 MIN
USER DEFINED CODES	P145	U 3065 PAR	U 3065 PARKS 8 45 MIN
USER DEFINED CODES	P146	1596B CUST	1596B CUSTOD TOLL 8 30 MIN
USER DEFINED CODES	P147	NON U HRLY	NON-U-HRLYTMP-30MIN
USER DEFINED CODES	P148	U 1596B 8	U 1596B 8 HR 30 MIN
USER DEFINED CODES	P149	U 1596A LI	U 1596A LIB FT 7.5 HR
USER DEFINED CODES	P150	U 1596B 7.	U 1596B 7.5 HR 30 MIN
USER DEFINED CODES	P151	U 3065 FOR	U 3065 FOREMAN 8 45
USER DEFINED CODES	P152	U 3065 10	U 3065 10 45
USER DEFINED CODES	P153	NON UNION	NON UNION 8 HR 30 MIN
USER DEFINED CODES	P154	NON UNION	NON UNION 7.5 HR 30 MIN
USER DEFINED CODES	P155	NON-U-HRLY	NON-U-HRLYTMP-NOLUNCH

USER DEFINED CODES	P156	NON BARG	NON BARG BI 7.5 HR 30 MIN
USER DEFINED CODES	P157	NUHRLYT NO	NON-U-HRLYTMP-30MIN NO HOLIDAY
USER DEFINED CODES	P169	U SAME DPW	U SAME DPW FT 11PM DAY
USER DEFINED CODES	P173	NON UNION	NON UNION SALARY FT 40 HR
USER DEFINED CODES	P174	NON U-20HR	NON UNION SALARY PT-20 HR WK
USER DEFINED CODES	P175	NU HR FT40	NON UNION HOURLY FT 40 HR
USER DEFINED CODES	P176	NON PT SSA	NON UNION HOURLY PT-SSAI
USER DEFINED CODES	P559	NON EXMPT	NON EXMPT HRLYFT NOHOL BIWKL

### 3. TLM Person Type



TLM PERSON TYPE
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USER DEFINED CODES	TC01	CLOCK EMPL	CLOCK EMPLOYEE
USER DEFINED CODES	TC02	PC USER HO	PC USER HOURLY TIMESTAMP
USER DEFINED CODES	TC03	PC USER SA	PC USER SALARY PROJECT VIEW
USER DEFINED CODES	TC04	MANAGER-DE	MANAGER-DEPT-DPW
USER DEFINED CODES	TC06	MANAGER-DE	MANAGER-DEPT-PARK
USER DEFINED CODES	TC07	MANAGER-DE	MANAGER-DEPT-CITY
USER DEFINED CODES	TC08	ADMIN-DEPT	ADMIN-DEPT-DPW
USER DEFINED CODES	TC10	ADMIN-DEPT	ADMIN-DEPT-PARK
USER DEFINED CODES	TC11	ADMIN-DEPT	ADMIN-DEPT-CITY
USER DEFINED CODES	TC13	SUPER USER	SUPER USER
USER DEFINED CODES	TC14	PAYROLL MA	PAYROLL MANAGER-CITY

## 4. TLM Accrual Profiles

ACCRUAL PROFILES

Table	Table Description
201	NON UNION HOURLY FT
202	NON UNION HOURLY PT
203	NON UNION SALARY FT
207	U 1596A LIB FT 10 HR
208	U 1596A LIB FT 8 HR
209	U 1596A LIB PT
210	U 1596A LIB TM 10 HR
212	U 1596B CLERICAL FT
213	U 1596B CLERICAL PT
214	U 3065 FOREMAN 37.5 HR
215	U 3065 FOREMAN 40 HR
216	U 1596B TOLL COLLECTORS PT 8HR
224	U 888 CIVIL ENGINEER
225	U BLDG INSPEC ASSOC
226	U LIBR CLRK FT 10 HR
227	U LIBR CLRK FT 8 HR
228	U LIBR CLRK PT 10 HR
229	U LIBR CLRK PT 8 HR
231	U PUB BLDG TRADESMAN
232	U PUB HEALTH NURSES
233	U SAME DPW FT
234	U SAME DPWGAR FT
235	U SAME OTHER
236	U SAME SOLDWAST 10HR
237	U SAME TRUCK DRIVERS
243	1596B 8 HR
244	NON U HRLY 8 HR
245	NON UNION SALARY LIB FT
252	NON UNION HOURLY PT WKLY
256	U 1596B TOLL COLLECTORS
257	U LIBR CLRK PT COMP
264	NON UNION HOURLY PT NO BENE
265	NON UNION SALARY FT 40 HR
266	NON UNION HOURLY FT 40 HR
267	CITY-SCH EXEMPT CONTRACT
268	NO BENEFITS
283	U BLDG INSPEC ASSOC FY2013

# Termination Form



# City of Springfield

## NOTICE OF EMPLOYMENT SEPARATION

ALL **Bolded** FIELDS ARE REQUIRED

SEND COMPLETED FORMS TO CITY HALL, PAYROLL DEPT.

<b>EMPLOYEE INFORMATION</b>	Employee Name: Last _____ First _____ Middle _____
	Effective Date: _____ Division: _____
	Social Security No: _____ Empl ID/File No: _____ Pay Group: _____
	<input type="checkbox"/> Update Mailing Address: Street: _____
	City: _____ State: _____ Zip Code: _____ Phone: _____

<b>SEPARATION INFORMATION</b>	Reason: <input type="checkbox"/> Resignation <input type="checkbox"/> Lay Off <input type="checkbox"/> Transfer <input type="checkbox"/> Retirement <input type="checkbox"/> <i>Involuntary Termination *</i>
	<input type="checkbox"/> Leave of Absence Specify Type: _____
	<input type="checkbox"/> Other Specify: _____
	Date Notice Given: _____ Date Last Worked: _____
	Paid Time Off owed to Employee: Vacation Hours: _____ Sick Hours: _____
	Other Hours: _____ Specify Type: _____
Eligible for Rehire: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Company Property Returned: <input type="checkbox"/> Yes <input type="checkbox"/> No Please Describe: _____	
Additional Comments: _____	

**\* IMPORTANT: DO NOT initiate any *INVOLUNTARY TERMINATION* proceedings until this form is returned to you with the signatures of the City Solicitor and Personnel Director.**

<b>APPROVALS</b>	Manager Signature: _____ Title: _____ Date: _____
	City Solicitor: _____ Date: _____
	Personnel Director: _____ Date: _____

# Direct Deposit Form



# City of Springfield, Massachusetts

## Employee Direct Deposit Enrollment Form

For full service direct deposit, and any changes, please complete this form and attach a voided check for each checking account (not a deposit slip). If you wish to deposit to a savings account, please obtain written documentation of your Account Number and Routing/Transit Number from with your financial institution. You may choose up to 3 checking accounts and/or 2 savings accounts. Please note that you must also indicate a cancellation when you close any account that you have set up for Direct Deposit. Forms without signatures will not be honored and will be returned.

Return all completed Direct Deposit Enrollment and Cancellation forms to: City Hall Payroll  
36 Court Street, Springfield, MA 01103 or fax to confidential fax 413-787-6592.



Routing/Transit #  
(A 9-digit number always  
between these two marks)

Checking Account #

Check #  
(this number matches the number in  
the upper right corner of the check—  
not needed for sign-up)

Name: Last \_\_\_\_\_ First \_\_\_\_\_

Last 4 Digits of Social Security Number or Employee ID: \_\_\_\_\_

Account1 <input type="checkbox"/> Add New Account <input type="checkbox"/> Change Direct Deposit Amount <input type="checkbox"/> Cancel Bank Name/City/State: _____ Routing/Transit Number: _____ Account No: _____ <input type="checkbox"/> Checking <input type="checkbox"/> Savings    I wish to deposit: \$ _____ / per pay period    or <input type="checkbox"/> Remaining Balance
Account2 <input type="checkbox"/> Add New Account <input type="checkbox"/> Change Direct Deposit Amount <input type="checkbox"/> Cancel Bank Name/City/State: _____ Routing/Transit Number: _____ Account No: _____ <input type="checkbox"/> Checking <input type="checkbox"/> Savings    I wish to deposit: \$ _____ / per pay period    or <input type="checkbox"/> Remaining Balance
Account3 <input type="checkbox"/> Add New Account <input type="checkbox"/> Change Direct Deposit Amount <input type="checkbox"/> Cancel Bank Name/City/State: _____ Routing/Transit Number: _____ Account No: _____ <input type="checkbox"/> Checking <input type="checkbox"/> Savings    I wish to deposit: \$ _____ / per pay period    or <input type="checkbox"/> Remaining Balance
Account4 <input type="checkbox"/> Add New Account <input type="checkbox"/> Change Direct Deposit Amount <input type="checkbox"/> Cancel Bank Name/City/State: _____ Routing/Transit Number: _____ Account No: _____ <input type="checkbox"/> Checking <input type="checkbox"/> Savings    I wish to deposit: \$ _____ / per pay period    or <input type="checkbox"/> Remaining Balance
Account5 <input type="checkbox"/> Add New Account <input type="checkbox"/> Change Direct Deposit Amount <input type="checkbox"/> Cancel Bank Name/City/State: _____ Routing/Transit Number: _____ Account No: _____ <input type="checkbox"/> Checking <input type="checkbox"/> Savings    I wish to deposit: \$ _____ / per pay period    or <input type="checkbox"/> Remaining Balance

I hereby authorize my Employer, either directly or through its payroll service provider, to deposit amounts owed to me, by initiating credit entries to the above account(s). In the event that my Employer deposits funds erroneously into my account, I authorize them to debit my account for an amount not to exceed the original amount of the erroneous credit.

Employee Signature: \_\_\_\_\_ Date: \_\_\_\_\_

