

**COMMISSIONERS' MINUTES
KITTITAS COUNTY, WASHINGTON
COMMISSIONERS CONFERENCE ROOM
REGULAR MEETING**

MONDAY

9:00 A.M.

FEBRUARY 24, 2014

Board members present: Chairman Paul Jewell; Vice-Chairman Gary Berndt. Excused: Commissioner Obie O'Brien.

Others: Mandy Buchholz, Deputy Clerk of the Board; Julie Kjorsvik, Clerk of the Board.

REGULAR MEETING

OFFICE STAFF MEETING

COMMISSIONERS

At 9:00 a.m. Chairman Jewell opened the Office Administration meeting.

CALENDAR

WEEK AT A GLANCE

COMMISSIONERS

The Board of County Commissioners reviewed their weekly calendar.

PAF/VOUCHERS

REVIEW OF PAF'S & VOUCHERS

COMMISSIONERS

The Board of County Commissioners approved and signed County Employee Personnel Action forms and vouchers.

CORRESPONDENCE LOG

REVIEW OF CORRESPONDENCE LOG

COMMISSIONERS

The Board of County Commissioners reviewed the weekly Correspondence Log, a listing of all incoming mail and correspondence for the week ending February 21, 2014.

UPDATE

BOCC-DEPARTMENT HEAD REPORTS/GENERAL UPDATES

COMMISSIONERS

Each Commissioner was assigned three different Department Heads to meet with on a weekly basis. This was determined at a Special Meeting with the Board of County Commissioners held on June 18, 2009. Each Commissioner reviewed discussions held with their respective departments and exchanged details of those meetings. On January 3, 2011 the Board determined it would be beneficial to alternate Commissioners that will oversee the different Department Head's on an annual basis. They determined at the end of 2013 they would review the various committees they participate in and provide beneficial updates to the Board.

REQUEST

B.KELLEY NOISE ORD WAIVER

COMMISSIONERS

Mandy Buchholz, Deputy Clerk of the Board presented a request from Beryl Kelley, Citizen requesting a waiver to the County Noise

APPROVED

3-4-2014

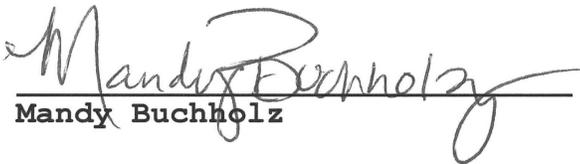
Ordinance to hold for a private party at her residence 1391 Reecer Creek Road, Ellensburg, WA 98926, on March 22, 2014; November 1, 2014; December 31, 2014 noting that the request was to allow music to play until midnight for each event. She stated in the letter that she would provide portable toilets and trash bins for the expected number of guests and that admission is limited to personal invitation only. She also indicated that her property is able to accommodate off street parking and it should be more than adequate since the public is not invited to the event.

Commissioner Berndt moved to approve a request for a waiver to the County Noise Ordinance from Beryl Kelley to hold a private party at her residence on March 22, 2014; November 1, 2014; December 31, 2014 at 1391 Reecer Creek Road until midnight, subject to Ms. Kelley submitting a listing of addresses that are within 500 feet of her residence notifying them of the party at least two weeks in advance of each event by 5:00 p.m. Commissioner Jewell seconded. Motion carried 2-0.

OTHER BUSINESS-N/A

Meeting adjourned at 9:27 a.m.

DEPUTY CLERK OF THE BOARD


Mandy Buchholz

**KITTITAS COUNTY COMMISSIONERS
KITTITAS COUNTY, WASHINGTON**


Paul Jewell, Chairman

**KITTITAS COUNTY COMMISSIONERS
REGULAR MEETING
OFFICE ADMINISTRATION MEETING
MONDAY, FEBRUARY 24, 2014
9:00 AM**

**BOCC Conference Room
205 West 5th Room 108 - Ellensburg**

- 1. Call to Order**
- 2. Review Commissioners Calendar**
- 3. PAF/Vouchers**
- 4. Review Weekly Correspondence Log**
- 5. Consider a Noise Ordinance Waiver Request from Beryl Kelley**
- 6. General Updates/Department Head Reports**
- 7. Other business**
- 8. Adjourn**

February 24, 2014 - March 02, 2014

February 2014							March 2014						
Su	Mo	Tu	We	Th	Fr	Sa	Su	Mo	Tu	We	Th	Fr	Sa
						1							1
2	3	4	5	6	7	8	2	3	4	5	6	7	8
9	10	11	12	13	14	15	9	10	11	12	13	14	15
16	17	18	19	20	21	22	16	17	18	19	20	21	22
23	24	25	26	27	28		23	24	25	26	27	28	29
							30	31					

Monday, February 24

- 12:00am Obie - out (Olympia) - Commissioners Calendar 2008 ↗
- 9:00am - 9:30am BOCC/Office Administration Meeting (Conference Room) - Commissioners Calendar 2008 ↗
- 9:40am - 10:30am BOCC/Dept. Head Meetings (Conference Room) - Commissioners Calendar 2008 ↗
- 11:00am - 12:00pm BoCC/Special Meeting Executive Session (BoCC Auditorium) - Commissioners Calendar 2008
- 1:00pm - 2:00pm Mandy Lunch - Commissioners Calendar 2008 ↗
- 1:30pm - 2:30pm BOCC/Public Works & CDS Study Session (BOCC Auditorium) - Commissioners Calendar 2008 ↗
- 2:00pm - 3:00pm Debbie - Lunch - Commissioners Calendar 2008 ↗
- 2:30pm - 4:00pm Paul/Canvassing Board (BoCC Conf. Room) - Com
- 3:30pm - 4:30pm Obie - Weekly Public Health Meeting with Robin
- 3:30pm - 4:00pm Commissioner Berndt / Jim G. Department Head
- 4:00pm - 5:00pm Paul - Stewart Title (Out)

Tuesday, February 25

- ↖ 12:00am Obie - out (Olympia) - Commissioners Calendar 2008
- 8:00am - 9:00am Security Committee (Auditorium) - Commissioners Calendar 2008 ↗
- 8:00am - 8:30am Paul-Public Works Staff Meeting (Public Works) - Commissioners Calendar 2008 ↗
- 9:00am - 10:00am GIS users (Bocc Auditorium) - Commissioners Calendar ↗
- 10:00am - 11:00am BOCC/HR Study Session (BoCC Conference Room) - Commissioners Calendar 2008 ↗
- 1:00pm - 2:00pm Mandy Lunch - Commissioners Calendar 2008 ↗
- 2:00pm - 3:00pm Debbie - Lunch - Commissioners Calendar 2008 ↗
- 3:00pm - 3:30pm Gary/Meeting with Art Scott and Kathleen Horner (UDC) - Commissioners Calendar 2008
- 3:30pm - 4:00pm Paul/Canvassing Board (BoCC Conf. Room) - Com
- 6:30pm - 9:00pm Planning Commisson (Teaway Hall KVEC) ↗

Wednesday, February 26

- 8:00am - 9:00am Gary/Disability Board (Conference Room) - Commissioners Calendar 2008 ↗
- 9:00am - 10:00am Records Management Committee (BoCC Auditorium) - Commissioners Calendar 2008 ↗
- 10:00am - 11:00am Mandy/Contact Lens Appointment
- 10:00am - 11:00am Safety Committee (BoCC Auditorium) - Commissioners Calendar ↗
- 12:00pm - 1:00pm WW at Work Meeting (BoCC Conference Room) ↗
- 1:00pm - 3:00pm BoCC/Board of Health (Special Meeting) (Auditor
- 1:00pm - 2:00pm CANCELLED Mandy Lunch (taking at 10:00) - Co
- 2:00pm - 3:00pm Debbie - Lunch - Commissioners Calendar 2008 ↗
- 3:30pm - 5:00pm obie - YBFWRB (Yakima)
- 4:50pm - 5:00pm Mandy Out
- 6:00pm - 8:00pm BoCC/Public Hearing Comp Plan Compliance (He

Thursday, February 27

- 6:30am - 3:00pm Paul - Columbia River Policy Advisory Group (Olympia)
- 8:30am - 11:00am Obie - WCIF Travel (Seattle)
- 11:00am - 3:00pm obie - WCIF (Seattle DoubleTree)
- 1:00pm - 2:00pm Mandy Lunch - Commissioners Calendar 2008 ↗
- 2:00pm - 3:00pm Debbie - Lunch - Commissioners Calendar 2008 ↗
- 3:00pm - 4:00pm Paul - Meeting with the Chamber (Commissioner's Conference Room)
- 6:00pm - 10:00pm CANCELLED-Hearings Examiner (BOCC Auditorium) ↗

Friday, February 28

- 8:30am - 10:00am Paul - Weekly Department Head Meeting (Brenda's Office (Fire Marshal)) - Paul Jewell ↗
- 9:00am - 11:00am Lower District Court (Auditorium) - Commissioners Calendar 2008 ↗
- 10:00am - 11:00am BoCC/Finance Study Session (Special Meeting) (BoCC Conference Room) - Commissioners Calendar 2008
- 11:00am - 12:00pm BoCC/Special Meeting 2014 Work Plan Update (BoCC Conf. Room) - Commissioners Calendar 2008
- 12:00pm - 1:00pm Mandy/Birthday Lunch (TBD) - Commissioners Calendar 2008
- 12:00pm - 12:30pm E-mail Mike Johnston Monday Agenda, Depar
- 1:00pm - 2:00pm Mandy Lunch - Commissioners Calendar 2008 ↗
- 1:30pm - 2:00pm BoCC/Special Meeting to Discuss and Consider w
- 2:00pm - 3:00pm BOCC/Special Meeting - Public Benefit Rating Sy
- 2:00pm - 3:00pm Debbie - Lunch - Commissioners Calendar 2008 ↗



KITTITAS COUNTY PERSONNEL ACTION FORM (PAF)

SECTION 1: EMPLOYEE DATA

LAST NAME Childs	FIRST NAME Heidi	EMPLOYEE # S2014	EFFECTIVE DATE 03/03/2014
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SECTION 2: TYPE OF ACTION

EMPLOYEE TYPE	EMPLOYEE ACTION	TYPE OF SEPARATION	REASON FOR SEPARATION
<input type="checkbox"/> FULL-TIME (1) <input type="checkbox"/> PART-TIME (2) <input type="checkbox"/> LIMITED PART-TIME (3) <input type="checkbox"/> TEMPORARY (4) <input type="checkbox"/> CASUAL (5) <input type="checkbox"/> SEASONAL (6) <input type="checkbox"/> PROJECT (7) <input type="checkbox"/> WORK STUDY (8) <input type="checkbox"/> VOLUNTEER (9)	<input type="checkbox"/> NEW HIRE <input type="checkbox"/> RE-HIRE <input type="checkbox"/> MERIT / STEP <input type="checkbox"/> POSITION CHANGE (Describe Below) <input type="checkbox"/> BUDGET CHANGE (Describe Below) <input checked="" type="checkbox"/> LEAVE (List Type Below) <input type="checkbox"/> TERMINATION (Provide Separation Info) <input type="checkbox"/> OTHER (Describe Below)	<input type="checkbox"/> DISCHARGE (D) <input type="checkbox"/> RESIGNATION (Q) <input type="checkbox"/> RETIRED (R) <input type="checkbox"/> LAID OFF (L) <input type="checkbox"/> FAIL PROBATION (P) <input type="checkbox"/> OTHER (O)	<input type="checkbox"/> PERFORMANCE (P) <input type="checkbox"/> ATTENDANCE (A) <input type="checkbox"/> CONDUCT (C) <input type="checkbox"/> OTHER EMPLOYMENT (E) <input type="checkbox"/> PERSONAL (L) <input type="checkbox"/> OTHER (O)
		<input type="checkbox"/> Eligible For Rehire <input type="checkbox"/> Ineligible For Rehire	
Provide Details of Separation Below			

COMMENTS : Remove from FMLA

SECTION 3: POSITION DATA

	Enter existing data from CAMAS Wage Data Report	Enter new data
JOB TITLE	FISCAL ANALYST	
OCCUPATION CODE	3233	
UNION CODE	20	
PAY GRADE	333	
STEP / POSITION	7	
FLSA STATUS	<input checked="" type="checkbox"/> Non-Exempt <input type="checkbox"/> Exempt <input type="checkbox"/> Not Covered	<input checked="" type="checkbox"/> Non-Exempt <input type="checkbox"/> Exempt <input type="checkbox"/> Not Covered
DRS STATUS	<input type="checkbox"/> Ineligible <input checked="" type="checkbox"/> PERS <input type="checkbox"/> LEOFF <input type="checkbox"/> PSERS <input type="checkbox"/> Other	<input type="checkbox"/> Ineligible <input checked="" type="checkbox"/> PERS <input type="checkbox"/> LEOFF <input type="checkbox"/> PSERS <input type="checkbox"/> Other
HIRE DATE	9/4/2007	
ADJ HIRE DATE	9/4/2007	
POSITION DATE	8/22/2011	
LAST RAISE DATE	9/1/2012	
BASE WAGE	\$3,969.00	\$0.00
LONGEVITY	\$0.00	\$
FTE	<input checked="" type="checkbox"/> 100% <input type="checkbox"/> 80% <input type="checkbox"/> 75% <input type="checkbox"/> 60% <input type="checkbox"/> 50%	<input checked="" type="checkbox"/> 100% <input type="checkbox"/> 80% <input type="checkbox"/> 75% <input type="checkbox"/> 60% <input type="checkbox"/> 50%
FTE WAGE	\$3,969.00	\$
PAYMENT METHOD	<input type="checkbox"/> HOURLY <input checked="" type="checkbox"/> MONTHLY	<input type="checkbox"/> HOURLY <input checked="" type="checkbox"/> MONTHLY
DEPARTMENT	AUDITOR	
BUDGET NUMBER	A. 001 000000000110251001 %: 100.00 B. _____ %: _____	A. _____ %: _____ B. _____ %: _____
WORKWEEK	<input checked="" type="checkbox"/> Standard <input type="checkbox"/> ALT/1 st Friday off: _____ <input type="checkbox"/> 207(k)	<input checked="" type="checkbox"/> Standard <input type="checkbox"/> ALT/1 st Friday off: _____ <input type="checkbox"/> 207(k)

To continue any allowance, stipend, or other, it must be listed in both columns for audit purposes or the amount will default to "0".

ALLOWANCE (Detail in Comments Section)	\$0.00	\$0.00
STIPEND (Detail in Comments Section)	\$0.00	\$0.00
OTHER (Detail in Comments Section)	\$0.00	\$0.00

SECTION 4: SIGNATURES (MUST BE SIGNED IN BLUE INK)

DEPARTMENT HEAD / ELECTED OFFICIAL <i>[Signature]</i>	DATE 2/21/14	BUDGET/PAYROLL <i>[Signature]</i>	DATE 2/21/14
HUMAN RESOURCE <i>[Signature]</i>	DATE 2/21/14	COMMISSIONER #1 <i>[Signature]</i>	DATE 2/21/14
COMMISSIONER #2 <i>[Signature]</i>	DATE 2/24/14	COMMISSIONER #3	DATE

RETURN FORM TO HUMAN RESOURCES FOR DISTRIBUTION



KITTITAS COUNTY PERSONNEL ACTION FORM (PAF)

SECTION 1: EMPLOYEE DATA

LAST NAME Avey	FIRST NAME Aaron	EMPLOYEE # A2261	EFFECTIVE DATE 02/12/2014
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SECTION 2: TYPE OF ACTION

EMPLOYEE TYPE	EMPLOYEE ACTION	TYPE OF SEPARATION	REASON FOR SEPARATION
<input type="checkbox"/> FULL-TIME (1) <input type="checkbox"/> PART-TIME (2) <input type="checkbox"/> LIMITED PART-TIME (3) <input type="checkbox"/> TEMPORARY (4) <input type="checkbox"/> CASUAL (5) <input type="checkbox"/> SEASONAL (6) <input checked="" type="checkbox"/> PROJECT (7) <input type="checkbox"/> WORK STUDY (8) <input type="checkbox"/> VOLUNTEER (9)	<input type="checkbox"/> NEW HIRE <input type="checkbox"/> RE-HIRE <input type="checkbox"/> MERIT / STEP <input checked="" type="checkbox"/> POSITION CHANGE (Describe Below) <input type="checkbox"/> BUDGET CHANGE (Describe Below) <input type="checkbox"/> LEAVE (List Type Below) <input type="checkbox"/> TERMINATION (Provide Separation Info) <input type="checkbox"/> OTHER (Describe Below)	<input type="checkbox"/> DISCHARGE (D) <input type="checkbox"/> RESIGNATION (Q) <input type="checkbox"/> RETIRED (R) <input type="checkbox"/> LAID OFF (L) <input type="checkbox"/> FAIL PROBATION (P) <input type="checkbox"/> OTHER (O)	<input type="checkbox"/> PERFORMANCE (P) <input type="checkbox"/> ATTENDANCE (A) <input type="checkbox"/> CONDUCT (C) <input type="checkbox"/> OTHER EMPLOYMENT (E) <input type="checkbox"/> PERSONAL (L) <input type="checkbox"/> OTHER (O)
		<input type="checkbox"/> Eligible For Rehire <input type="checkbox"/> Ineligible For Rehire Provide Details of Separation Below	

COMMENTS: Status change from Provisional Appointment to Thirty day (30) Emergency Appointment

SECTION 3: POSITION DATA

	Enter existing data from CAMAS Wage Data Report	Enter new data
JOB TITLE	PROVISIONAL APPOINTMENT	EMERGENCY APPOINTMENT
OCCUPATION CODE	5802	5803
UNION CODE	87	
PAY GRADE	502	502
STEP / POSITION	5	
FLSA STATUS	<input checked="" type="checkbox"/> Non-Exempt <input type="checkbox"/> Exempt <input type="checkbox"/> Not Covered	<input checked="" type="checkbox"/> Non-Exempt <input type="checkbox"/> Exempt <input type="checkbox"/> Not Covered
DRS STATUS	<input checked="" type="checkbox"/> Ineligible <input type="checkbox"/> PERS <input type="checkbox"/> LEOFF <input type="checkbox"/> PSERS <input type="checkbox"/> Other	<input checked="" type="checkbox"/> Ineligible <input type="checkbox"/> PERS <input type="checkbox"/> LEOFF <input type="checkbox"/> PSERS <input type="checkbox"/> Other
HIRE DATE	1/10/2011	
ADJ HIRE DATE	1/10/2011	
POSITION DATE	1/8/2014	2.12.14
LAST RAISE DATE		
BASE WAGE	\$0.00 19.50/hr	\$19.50 /hr
LONGEVITY	\$0.00	\$
FTE	<input checked="" type="checkbox"/> 100% <input type="checkbox"/> 80% <input type="checkbox"/> 75% <input type="checkbox"/> 60% <input type="checkbox"/> 50%	<input checked="" type="checkbox"/> 100% <input type="checkbox"/> 80% <input type="checkbox"/> 75% <input type="checkbox"/> 60% <input type="checkbox"/> 50%
FTE WAGE	\$	\$19.50
PAYMENT METHOD	<input checked="" type="checkbox"/> HOURLY <input type="checkbox"/> MONTHLY	<input checked="" type="checkbox"/> HOURLY <input type="checkbox"/> MONTHLY
DEPARTMENT	SHERIFF	
BUDGET NUMBER	A. 120 000000000302051003 %: 100.00 B. _____ %: _____	A. _____ %: _____ B. _____ %: _____
WORKWEEK	<input checked="" type="checkbox"/> Standard <input type="checkbox"/> ALT/1 st Friday off: ____ <input type="checkbox"/> 207(k)	<input checked="" type="checkbox"/> Standard <input type="checkbox"/> ALT/1 st Friday off: ____ <input type="checkbox"/> 207(k)

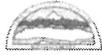
To continue any allowance, stipend, or other, it must be listed in both columns for audit purposes or the amount will default to "0".

ALLOWANCE (Detail in Comments Section)	\$0.00	\$0.00
STIPEND (Detail in Comments Section)	\$0.00	\$0.00
OTHER (Detail in Comments Section)	\$0.00	\$0.00

SECTION 4: SIGNATURES (MUST BE SIGNED IN BLUE INK)

DEPARTMENT HEAD / ELECTED OFFICIAL 	DATE 2/18/2014	BUDGET/PAYROLL 	DATE 2/11/14
HUMAN RESOURCE 	DATE 2/21/14	COMMISSIONER #1 	DATE 2/21/14
COMMISSIONER #2 	DATE 2/24/14	COMMISSIONER #3 	DATE 2/24/14

RETURN FORM TO HUMAN RESOURCES FOR DISTRIBUTION



KITTITAS COUNTY PERSONNEL ACTION FORM (PAF)

SECTION 1: EMPLOYEE DATA			
LAST NAME Morgen	FIRST NAME Jaime	EMPLOYEE # D1803	EFFECTIVE DATE 12/30/2013

SECTION 2: TYPE OF ACTION			
EMPLOYEE TYPE	EMPLOYEE ACTION	TYPE OF SEPARATION	REASON FOR SEPARATION
<input checked="" type="checkbox"/> FULL-TIME (1) <input type="checkbox"/> PART-TIME (2) <input type="checkbox"/> LIMITED PART-TIME (3) <input type="checkbox"/> TEMPORARY (4) <input type="checkbox"/> CASUAL (5) <input type="checkbox"/> SEASONAL (6) <input type="checkbox"/> PROJECT (7) <input type="checkbox"/> WORK STUDY (8) <input type="checkbox"/> VOLUNTEER (9)	<input type="checkbox"/> NEW HIRE <input type="checkbox"/> RE-HIRE <input type="checkbox"/> MERIT / STEP <input type="checkbox"/> POSITION CHANGE (Describe Below) <input type="checkbox"/> BUDGET CHANGE (Describe Below) <input checked="" type="checkbox"/> LEAVE (List Type Below) <input type="checkbox"/> TERMINATION (Provide Separation Info) <input type="checkbox"/> OTHER (Describe Below)	<input type="checkbox"/> DISCHARGE (D) <input type="checkbox"/> RESIGNATION (Q) <input type="checkbox"/> RETIRED (R) <input type="checkbox"/> LAID OFF (L) <input type="checkbox"/> FAIL PROBATION (P) <input type="checkbox"/> OTHER (O)	<input type="checkbox"/> PERFORMANCE (P) <input type="checkbox"/> ATTENDANCE (A) <input type="checkbox"/> CONDUCT (C) <input type="checkbox"/> OTHER EMPLOYMENT (E) <input type="checkbox"/> PERSONAL (L) <input type="checkbox"/> OTHER (O)
		<input type="checkbox"/> Eligible For Rehire <input type="checkbox"/> Ineligible For Rehire	
Provide Details of Separation Below			

COMMENTS : Full 12 wks FMLA with subsequent WSFLA additional for total of 16 weeks absence.

SECTION 3: POSITION DATA		
	<i>Enter existing data from CAMAS Wage Data Report</i>	<i>Enter new data</i>
JOB TITLE	JUV PROBATION COUNSELOR	
OCCUPATION CODE	2729	
UNION CODE	75	
PAY GRADE	229	
STEP / POSITION	5	
FLSA STATUS	<input checked="" type="checkbox"/> Non-Exempt <input type="checkbox"/> Exempt <input type="checkbox"/> Not Covered	<input checked="" type="checkbox"/> Non-Exempt <input type="checkbox"/> Exempt <input type="checkbox"/> Not Covered
DRS STATUS	<input type="checkbox"/> Ineligible <input type="checkbox"/> PERS <input type="checkbox"/> LEOFF <input checked="" type="checkbox"/> PSERS <input type="checkbox"/> Other	<input type="checkbox"/> Ineligible <input type="checkbox"/> PERS <input type="checkbox"/> LEOFF <input checked="" type="checkbox"/> PSERS <input type="checkbox"/> Other
HIRE DATE	2/1/2006	
ADJ HIRE DATE	2/1/2006	
POSITION DATE	11/2/2006	
LAST RAISE DATE	11/1/2010	
BASE WAGE	\$4,028.00	\$0.00
LONGEVITY	\$0.00	\$
FTE	<input checked="" type="checkbox"/> 100% <input type="checkbox"/> 80% <input type="checkbox"/> 75% <input type="checkbox"/> 60% <input type="checkbox"/> 50%	<input checked="" type="checkbox"/> 100% <input type="checkbox"/> 80% <input type="checkbox"/> 75% <input type="checkbox"/> 60% <input type="checkbox"/> 50%
FTE WAGE	\$4,028.00	\$
PAYMENT METHOD	<input type="checkbox"/> HOURLY <input checked="" type="checkbox"/> MONTHLY	<input type="checkbox"/> HOURLY <input checked="" type="checkbox"/> MONTHLY
DEPARTMENT	JUVENILE PROBATION	
BUDGET NUMBER	A. 001 000000000220251013 %: 100.00 B. 001 000000000220251001 %: 100.00	A. _____ %: _____ B. _____ %: _____
WORKWEEK	<input checked="" type="checkbox"/> Standard <input type="checkbox"/> ALT/1 st Friday off: ____ <input type="checkbox"/> 207(k)	<input checked="" type="checkbox"/> Standard <input type="checkbox"/> ALT/1 st Friday off: ____ <input type="checkbox"/> 207(k)
<i>To continue any allowance, stipend, or other, it must be listed in both columns for audit purposes or the amount will default to "0".</i>		
ALLOWANCE (Detail in Comments Section)	\$0.00	\$0.00
STIPEND (Detail in Comments Section)	\$0.00	\$0.00
OTHER (Detail in Comments Section)	\$0.00	\$0.00

SECTION 4: SIGNATURES (MUST BE SIGNED IN BLUE INK)			
DEPARTMENT HEAD / ELECTED OFFICIAL <i>William D. Holmes</i>	DATE 2/21/2014	BUDGET/PAYROLL <i>Andy Pless</i>	DATE 2/21/14
HUMAN RESOURCE <i>W. Morgen</i>	DATE 2/21/14	COMMISSIONER #1 <i>[Signature]</i>	DATE 2/21/14
COMMISSIONER #2 <i>Say Bredt</i>	DATE 2/24/14	COMMISSIONER #3 <i>[Signature]</i>	DATE 2/21/14

RETURN FORM TO HUMAN RESOURCES FOR DISTRIBUTION



KITTITAS COUNTY PERSONNEL ACTION FORM (PAF)

SECTION 1: EMPLOYEE DATA

LAST NAME Huston	FIRST NAME Matthew	EMPLOYEE # H2262	EFFECTIVE DATE 03/01/2014
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SECTION 2: TYPE OF ACTION

EMPLOYEE TYPE	EMPLOYEE ACTION	TYPE OF SEPARATION	REASON FOR SEPARATION
<input checked="" type="checkbox"/> FULL-TIME (1) <input type="checkbox"/> PART-TIME (2) <input type="checkbox"/> LIMITED PART-TIME (3) <input type="checkbox"/> TEMPORARY (4) <input type="checkbox"/> CASUAL (5) <input type="checkbox"/> SEASONAL (6) <input type="checkbox"/> PROJECT (7) <input type="checkbox"/> WORK STUDY (8) <input type="checkbox"/> VOLUNTEER (9)	<input type="checkbox"/> NEW HIRE <input type="checkbox"/> RE-HIRE <input checked="" type="checkbox"/> MERIT / STEP <input type="checkbox"/> POSITION CHANGE (Describe Below) <input type="checkbox"/> BUDGET CHANGE (Describe Below) <input type="checkbox"/> LEAVE (List Type Below) <input type="checkbox"/> TERMINATION (Provide Separation Info) <input type="checkbox"/> OTHER (Describe Below)	<input type="checkbox"/> DISCHARGE (D) <input type="checkbox"/> RESIGNATION (Q) <input type="checkbox"/> RETIRED (R) <input type="checkbox"/> LAID OFF (L) <input type="checkbox"/> FAIL PROBATION (P) <input type="checkbox"/> OTHER (O)	<input type="checkbox"/> PERFORMANCE (P) <input type="checkbox"/> ATTENDANCE (A) <input type="checkbox"/> CONDUCT (C) <input type="checkbox"/> OTHER EMPLOYMENT (E) <input type="checkbox"/> PERSONAL (L) <input type="checkbox"/> OTHER (O)
		<input type="checkbox"/> Eligible For Rehire <input type="checkbox"/> Ineligible For Rehire	
Provide Details of Separation Below			

COMMENTS :

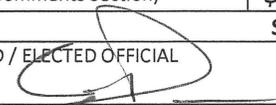
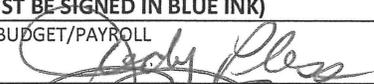
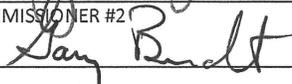
SECTION 3: POSITION DATA

	Enter existing data from CAMAS Wage Data Report	Enter new data
JOB TITLE	CORRECTIONS OFFICER	
OCCUPATION CODE	5721	
UNION CODE	72	
PAY GRADE	521	
STEP / POSITION	2	3
FLSA STATUS	<input checked="" type="checkbox"/> Non-Exempt <input type="checkbox"/> Exempt <input type="checkbox"/> Not Covered	<input checked="" type="checkbox"/> Non-Exempt <input type="checkbox"/> Exempt <input type="checkbox"/> Not Covered
DRS STATUS	<input type="checkbox"/> Ineligible <input type="checkbox"/> PERS <input type="checkbox"/> LEOFF <input checked="" type="checkbox"/> PSERS <input type="checkbox"/> Other	<input type="checkbox"/> Ineligible <input type="checkbox"/> PERS <input type="checkbox"/> LEOFF <input checked="" type="checkbox"/> PSERS <input type="checkbox"/> Other
HIRE DATE	1/10/2011	
ADJ HIRE DATE	3/11/2012	
POSITION DATE	3/11/2012	
LAST RAISE DATE	3/1/2013	3-1-14
BASE WAGE	\$3,256.00	\$3,387.00
LONGEVITY	\$0.00	\$
FTE	<input checked="" type="checkbox"/> 100% <input type="checkbox"/> 80% <input type="checkbox"/> 75% <input type="checkbox"/> 60% <input type="checkbox"/> 50%	<input checked="" type="checkbox"/> 100% <input type="checkbox"/> 80% <input type="checkbox"/> 75% <input type="checkbox"/> 60% <input type="checkbox"/> 50%
FTE WAGE	\$3,256.00	\$3,387.00
PAYMENT METHOD	<input type="checkbox"/> HOURLY <input checked="" type="checkbox"/> MONTHLY	<input type="checkbox"/> HOURLY <input checked="" type="checkbox"/> MONTHLY
DEPARTMENT	SHERIFF	
BUDGET NUMBER	A. 001 000000030070151001 %: 100.00 B. _____ %: _____	A. _____ %: _____ B. _____ %: _____
WORKWEEK	<input type="checkbox"/> Standard <input type="checkbox"/> ALT/1 st Friday off: _____ <input checked="" type="checkbox"/> 207(k)	<input type="checkbox"/> Standard <input type="checkbox"/> ALT/1 st Friday off: _____ <input checked="" type="checkbox"/> 207(k)

To continue any allowance, stipend, or other, it must be listed in both columns for audit purposes or the amount will default to "0".

ALLOWANCE (Detail in Comments Section)	\$0.00	\$0.00
STIPEND (Detail in Comments Section)	\$100.00	\$100.00
OTHER (Detail in Comments Section)	\$0.00	\$0.00

SECTION 4: SIGNATURES (MUST BE SIGNED IN BLUE INK)

DEPARTMENT HEAD / ELECTED OFFICIAL 	DATE 2/20/2014	BUDGET/PAYROLL 	DATE 2/21/14
HUMAN RESOURCE #1 	DATE 2/21/14	COMMISSIONER #1 	DATE 2/21/14
COMMISSIONER #2 	DATE 2/24/14	COMMISSIONER #3	DATE

RETURN FORM TO HUMAN RESOURCES FOR DISTRIBUTION



KITTITAS COUNTY PERSONNEL ACTION FORM (PAF)

SECTION 1: EMPLOYEE DATA

LAST NAME Scott	FIRST NAME Mike	EMPLOYEE # S1958	EFFECTIVE DATE 03/03/14
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SECTION 2: TYPE OF ACTION

EMPLOYEE TYPE	EMPLOYEE ACTION	TYPE OF SEPARATION	REASON FOR SEPARATION
<input checked="" type="checkbox"/> FULL-TIME (1) <input type="checkbox"/> PART-TIME (2) <input type="checkbox"/> LIMITED PART-TIME (3) <input type="checkbox"/> TEMPORARY (4) <input type="checkbox"/> CASUAL (5) <input type="checkbox"/> SEASONAL (6) <input type="checkbox"/> PROJECT (7) <input type="checkbox"/> WORK STUDY (8) <input type="checkbox"/> VOLUNTEER (9)	<input type="checkbox"/> NEW HIRE <input checked="" type="checkbox"/> RE-HIRE <input type="checkbox"/> MERIT / STEP <input type="checkbox"/> POSITION CHANGE (Describe Below) <input type="checkbox"/> BUDGET CHANGE (Describe Below) <input type="checkbox"/> LEAVE (List Type Below) <input type="checkbox"/> TERMINATION (Provide Separation Info) <input type="checkbox"/> OTHER (Describe Below)	<input type="checkbox"/> DISCHARGE (D) <input type="checkbox"/> RESIGNATION (Q) <input type="checkbox"/> RETIRED (R) <input type="checkbox"/> LAID OFF (L) <input type="checkbox"/> FAIL PROBATION (P) <input type="checkbox"/> OTHER (O)	<input type="checkbox"/> PERFORMANCE (P) <input type="checkbox"/> ATTENDANCE (A) <input type="checkbox"/> CONDUCT (C) <input type="checkbox"/> OTHER EMPLOYMENT (E) <input type="checkbox"/> PERSONAL (L) <input type="checkbox"/> OTHER (O)
		<input type="checkbox"/> Eligible For Rehire <input type="checkbox"/> Ineligible For Rehire	
Provide Details of Separation Below			

COMMENTS: Re-hire. Employment expected to last through Novemer. Monthly Smart Phone Stipend - \$60. Eligible for stipend reimbursement for 2014 WSU Pesticide Recertification Training and 2014 WSDA Pesticide License renewal fee.

SECTION 3: POSITION DATA

	Enter existing data from CAMAS Wage Data Report	Enter new data
JOB TITLE	Noxious Weed Inspector II <i>lead</i>	
OCCUPATION CODE	2152 2490	
UNION CODE	40	
PAY GRADE	290	
STEP / POSITION	2 5	
FLSA STATUS	<input checked="" type="checkbox"/> Non-Exempt <input type="checkbox"/> Exempt <input type="checkbox"/> Not Covered	<input type="checkbox"/> Non-Exempt <input type="checkbox"/> Exempt <input type="checkbox"/> Not Covered
DRS STATUS	<input type="checkbox"/> Ineligible <input checked="" type="checkbox"/> PERS <input type="checkbox"/> LEOFF <input type="checkbox"/> PSERS <input type="checkbox"/> Other	<input type="checkbox"/> Ineligible <input type="checkbox"/> PERS <input type="checkbox"/> LEOFF <input type="checkbox"/> PSERS <input type="checkbox"/> Other
HIRE DATE	03/03/14	
ADJ HIRE DATE	03/03/14	
POSITION DATE	03/03/14	
LAST RAISE DATE		
BASE WAGE	\$13.73	\$
LONGEVITY	\$	\$
FTE	<input checked="" type="checkbox"/> 100% <input type="checkbox"/> 80% <input type="checkbox"/> 75% <input type="checkbox"/> 60% <input type="checkbox"/> 50%	<input type="checkbox"/> 100% <input type="checkbox"/> 80% <input type="checkbox"/> 75% <input type="checkbox"/> 60% <input type="checkbox"/> 50%
FTE WAGE	\$13.73	\$
PAYMENT METHOD	<input checked="" type="checkbox"/> HOURLY <input type="checkbox"/> MONTHLY	<input type="checkbox"/> HOURLY <input type="checkbox"/> MONTHLY
DEPARTMENT	123	
BUDGET NUMBER	A. <u>1230000000051003</u> %: <u>100</u> B. _____ %: _____	A. _____ %: _____ B. _____ %: _____
WORKWEEK	<input checked="" type="checkbox"/> Standard <input type="checkbox"/> ALT/1 st Friday off: _____ <input type="checkbox"/> 207(k)	<input type="checkbox"/> Standard <input type="checkbox"/> ALT/1 st Friday off: _____ <input type="checkbox"/> 207(k)

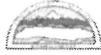
To continue any allowance, stipend, or other, it must be listed in **both** columns for audit purposes or the amount will default to "0".

ALLOWANCE (Detail in Comments Section)	\$	\$
STIPEND (Detail in Comments Section)	\$60	\$60 <i>.34¢ cents per hour</i>
OTHER (Detail in Comments Section)	\$	\$

SECTION 4: SIGNATURES (MUST BE SIGNED IN BLUE INK)

DEPARTMENT HEAD / ELECTED OFFICIAL <i>Pat Min</i>	DATE 02/19/14	BUDGET/PAYROLL <i>Andy Bless</i>	DATE 2/21/14
HUMAN RESOURCE <i>SC [Signature]</i>	DATE 2/21/14	COMMISSIONER #1 <i>[Signature]</i>	DATE 2/21/14
COMMISSIONER #2 <i>Ray Bault</i>	DATE 2/29/14	COMMISSIONER #3 <i>[Signature]</i>	DATE 2/21/14

RETURN FORM TO HUMAN RESOURCES FOR DISTRIBUTION



KITTITAS COUNTY PERSONNEL ACTION FORM (PAF)

SECTION 1: EMPLOYEE DATA			
LAST NAME Heitman	FIRST NAME Kate	EMPLOYEE # H1956	EFFECTIVE DATE 2/17/2014

SECTION 2: TYPE OF ACTION			
EMPLOYEE TYPE	EMPLOYEE ACTION	TYPE OF SEPARATION	REASON FOR SEPARATION
<input checked="" type="checkbox"/> FULL-TIME (1) <input type="checkbox"/> PART-TIME (2) <input type="checkbox"/> LIMITED PART-TIME (3) <input type="checkbox"/> TEMPORARY (4) <input type="checkbox"/> CASUAL (5) <input type="checkbox"/> SEASONAL (6) <input type="checkbox"/> PROJECT (7) <input type="checkbox"/> WORK STUDY (8) <input type="checkbox"/> VOLUNTEER (9)	<input type="checkbox"/> NEW HIRE <input type="checkbox"/> RE-HIRE <input type="checkbox"/> MERIT / STEP <input type="checkbox"/> POSITION CHANGE (Describe Below) <input type="checkbox"/> BUDGET CHANGE (Describe Below) <input type="checkbox"/> LEAVE (List Type Below) <input type="checkbox"/> TERMINATION (Provide Separation Info) <input checked="" type="checkbox"/> OTHER (Describe Below)	<input type="checkbox"/> DISCHARGE (D) <input type="checkbox"/> RESIGNATION (Q) <input type="checkbox"/> RETIRED (R) <input type="checkbox"/> LAID OFF (L) <input type="checkbox"/> FAIL PROBATION (P) <input type="checkbox"/> OTHER (O)	<input type="checkbox"/> PERFORMANCE (P) <input type="checkbox"/> ATTENDANCE (A) <input type="checkbox"/> CONDUCT (C) <input type="checkbox"/> OTHER EMPLOYMENT (E) <input type="checkbox"/> PERSONAL (L) <input type="checkbox"/> OTHER (O)
		<input type="checkbox"/> Eligible For Rehire <input type="checkbox"/> Ineligible For Rehire	
Provide Details of Separation Below			

COMMENTS: Returning to work after FMLA/FLA absence

SECTION 3: POSITION DATA		
	<i>Enter existing data from CAMAS Wage Data Report</i>	<i>Enter new data</i>
JOB TITLE	JUV PROBATION COUNSELOR	
OCCUPATION CODE	2729	
UNION CODE	75	
PAY GRADE	229	
STEP / POSITION	5	
FLSA STATUS	<input checked="" type="checkbox"/> Non-Exempt <input type="checkbox"/> Exempt <input type="checkbox"/> Not Covered	<input checked="" type="checkbox"/> Non-Exempt <input type="checkbox"/> Exempt <input type="checkbox"/> Not Covered
DRS STATUS	<input type="checkbox"/> Ineligible <input type="checkbox"/> PERS <input type="checkbox"/> LEOFF <input checked="" type="checkbox"/> PSERS <input type="checkbox"/> Other	<input type="checkbox"/> Ineligible <input type="checkbox"/> PERS <input type="checkbox"/> LEOFF <input checked="" type="checkbox"/> PSERS <input type="checkbox"/> Other
HIRE DATE	3/29/2007	
ADJ HIRE DATE	3/29/2007	
POSITION DATE	3/29/2007	
LAST RAISE DATE	4/1/2011	
BASE WAGE	\$4,028.00	\$0.00
LONGEVITY	\$0.00	\$
FTE	<input checked="" type="checkbox"/> 100% <input type="checkbox"/> 80% <input type="checkbox"/> 75% <input type="checkbox"/> 60% <input type="checkbox"/> 50%	<input checked="" type="checkbox"/> 100% <input type="checkbox"/> 80% <input type="checkbox"/> 75% <input type="checkbox"/> 60% <input type="checkbox"/> 50%
FTE WAGE	\$4,028.00	\$
PAYMENT METHOD	<input type="checkbox"/> HOURLY <input checked="" type="checkbox"/> MONTHLY	<input type="checkbox"/> HOURLY <input checked="" type="checkbox"/> MONTHLY
DEPARTMENT	JUVENILE PROBATION	
BUDGET NUMBER	A. 001 000000000220251013 %: 100.00 B. 001 000000000220251001 %: 100.00	A. _____ %: _____ B. _____ %: _____
WORKWEEK	<input checked="" type="checkbox"/> Standard <input type="checkbox"/> ALT/1 st Friday off: _____ <input type="checkbox"/> 207(k)	<input checked="" type="checkbox"/> Standard <input type="checkbox"/> ALT/1 st Friday off: _____ <input type="checkbox"/> 207(k)

To continue any allowance, stipend, or other, it must be listed in both columns for audit purposes or the amount will default to "0".

ALLOWANCE (Detail in Comments Section)	\$0.00	\$0.00
STIPEND (Detail in Comments Section)	\$0.00	\$0.00
OTHER (Detail in Comments Section)	\$0.00	\$0.00

SECTION 4: SIGNATURES (MUST BE SIGNED IN BLUE INK)			
DEPARTMENT HEAD / ELECTED OFFICIAL <i>William D Helms</i>	DATE 2/19/2014	BUDGET/PAYROLL <i>Andy Pless</i>	DATE 2/21/14
HUMAN RESOURCE <i>[Signature]</i>	DATE 2/21/14	COMMISSIONER #1 <i>[Signature]</i>	DATE 2/21/14
COMMISSIONER #2 <i>[Signature]</i>	DATE 2/24/14	COMMISSIONER #3 <i>[Signature]</i>	DATE 2/21/14

RETURN FORM TO HUMAN RESOURCES FOR DISTRIBUTION



KITTITAS COUNTY PERSONNEL ACTION FORM (PAF)

SECTION 1: EMPLOYEE DATA

LAST NAME Larson	FIRST NAME Andrew	EMPLOYEE # L2338	EFFECTIVE DATE 02/23/2014
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SECTION 2: TYPE OF ACTION

EMPLOYEE TYPE	EMPLOYEE ACTION	TYPE OF SEPARATION	REASON FOR SEPARATION
<input type="checkbox"/> FULL-TIME (1) <input type="checkbox"/> PART-TIME (2) <input type="checkbox"/> LIMITED PART-TIME (3) <input type="checkbox"/> TEMPORARY (4) <input type="checkbox"/> CASUAL (5) <input type="checkbox"/> SEASONAL (6) <input type="checkbox"/> PROJECT (7) <input type="checkbox"/> WORK STUDY (8) <input checked="" type="checkbox"/> VOLUNTEER (9)	<input type="checkbox"/> NEW HIRE <input type="checkbox"/> RE-HIRE <input type="checkbox"/> MERIT / STEP <input type="checkbox"/> POSITION CHANGE (Describe Below) <input type="checkbox"/> BUDGET CHANGE (Describe Below) <input type="checkbox"/> LEAVE (List Type Below) <input checked="" type="checkbox"/> TERMINATION (Provide Separation Info) <input type="checkbox"/> OTHER (Describe Below)	<input type="checkbox"/> DISCHARGE (D) <input checked="" type="checkbox"/> RESIGNATION (Q) <input type="checkbox"/> RETIRED (R) <input type="checkbox"/> LAID OFF (L) <input type="checkbox"/> FAIL PROBATION (P) <input type="checkbox"/> OTHER (O)	<input type="checkbox"/> PERFORMANCE (P) <input type="checkbox"/> ATTENDANCE (A) <input type="checkbox"/> CONDUCT (C) <input checked="" type="checkbox"/> OTHER EMPLOYMENT (E) <input type="checkbox"/> PERSONAL (L) <input type="checkbox"/> OTHER (O)
		<input type="checkbox"/> Eligible For Rehire <input type="checkbox"/> Ineligible For Rehire	
Provide Details of Separation Below			

COMMENTS : Employee has accepted employment with another agency

SECTION 3: POSITION DATA

	Enter existing data from CAMAS Wage Data Report	Enter new data
JOB TITLE	RESERVE SHERIFF DEPUTY	
OCCUPATION CODE	5801	
UNION CODE	89	
PAY GRADE	501	
STEP / POSITION	2	
FLSA STATUS	<input checked="" type="checkbox"/> Non-Exempt <input type="checkbox"/> Exempt <input type="checkbox"/> Not Covered	<input checked="" type="checkbox"/> Non-Exempt <input type="checkbox"/> Exempt <input type="checkbox"/> Not Covered
DRS STATUS	<input type="checkbox"/> Ineligible <input type="checkbox"/> PERS <input type="checkbox"/> LEOFF <input type="checkbox"/> PSERS <input type="checkbox"/> Other	<input type="checkbox"/> Ineligible <input type="checkbox"/> PERS <input type="checkbox"/> LEOFF <input type="checkbox"/> PSERS <input type="checkbox"/> Other
HIRE DATE	1/9/2012	
ADJ HIRE DATE	1/9/2012	
POSITION DATE	5/11/2012	
LAST RAISE DATE		
BASE WAGE	\$0.00 11.50	\$0.00
LONGEVITY	\$0.00	\$
FTE	<input checked="" type="checkbox"/> 100% <input type="checkbox"/> 80% <input type="checkbox"/> 75% <input type="checkbox"/> 60% <input type="checkbox"/> 50%	<input checked="" type="checkbox"/> 100% <input type="checkbox"/> 80% <input type="checkbox"/> 75% <input type="checkbox"/> 60% <input type="checkbox"/> 50%
FTE WAGE	\$ 11.50	\$
PAYMENT METHOD	<input checked="" type="checkbox"/> HOURLY <input type="checkbox"/> MONTHLY	<input checked="" type="checkbox"/> HOURLY <input type="checkbox"/> MONTHLY
DEPARTMENT	SHERIFF	
BUDGET NUMBER	A. <u>001 000000000300251003</u> %: <u>100.00</u> B. _____ %: _____	A. _____ %: _____ B. _____ %: _____
WORKWEEK	<input checked="" type="checkbox"/> Standard <input type="checkbox"/> ALT/1 st Friday off: _____ <input type="checkbox"/> 207(k)	<input checked="" type="checkbox"/> Standard <input type="checkbox"/> ALT/1 st Friday off: _____ <input type="checkbox"/> 207(k)

To continue any allowance, stipend, or other, it must be listed in both columns for audit purposes or the amount will default to "0".

ALLOWANCE (Detail in Comments Section)	\$0.00	\$0.00
STIPEND (Detail in Comments Section)	\$0.00	\$0.00
OTHER (Detail in Comments Section)	\$0.00	\$0.00

SECTION 4: SIGNATURES (MUST BE SIGNED IN BLUE INK)

DEPARTMENT HEAD / ELECTED OFFICIAL 	DATE 2/15/2014	BUDGET/PAYROLL 	DATE 2/21/14
HUMAN RESOURCE 	DATE 2/21/14	COMMISSIONER #1 	DATE 2/21/14
COMMISSIONER #2 	DATE 2/24/14	COMMISSIONER #3	DATE

RETURN FORM TO HUMAN RESOURCES FOR DISTRIBUTION

**Kittitas County
Board of County Commissioners**

Please include in your next regular agenda session and read into the minutes:

Voucher Approval

The Kittitas County Board of County Commissioners on _February 24, 2014 approved the vouchers audited and certified by the auditing officer as required by RCW 42.24.080, and those expense reimbursement claims certified as required by RCW 42.24.090, which has been recorded on a listing and made available to the Board which include claims warrant #_810273006_ through #_810273132_ in the amount of \$_358,258.51.

Auditing officer's notes:

Commissioner Remarks:

**Kittitas County
Board of County Commissioners**

Please include in your next regular agenda session and read into the minutes:

Voucher Approval

The Kittitas County Board of County Commissioners on February 19, 2014 approved the vouchers audited and certified by the auditing officer as required by RCW 42.24.080, and those expense reimbursement claims certified as required by RCW 42.24.090, which has been recorded on a listing and made available to the Board which include claims warrant # 810272828 through # 810272828 in the amount of \$ -79.00.

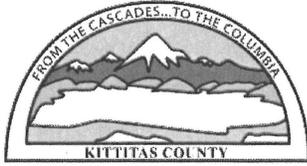
Auditing officer's notes:

Commissioner Remarks:

BOARD OF COUNTY COMMISSIONERS
CORRESPONDENCE LOG FOR THE WEEK ENDING: FEBRUARY 21, 2014

REVIEWED AT ADMINISTRATIVE MEETING ON: February 24, 2014

	ITEM	SUBJECT	ACTION	FOLLOW UP	FILE REFERENCE
2-17-14	Public disclosure request from Jessica Kuchan, Seattle	See Dart request	Dart		Dart
2-18-14	Letter from Gene Dana, Kittitas County Sheriff	Re: marijuana license application for Jam Box 270 Mission Rd, Thorp, William Boatman, David & Pamela Otto, William Whelan & Cynthia Withrow for marijuana producer tier 3 & marijuana processor	BOCC, CDS, PA		Comment file
2-18-14	Directors report and minutes from Dispute Resolution Center	Minutes from Dec. 10, 2013, Directors Report for January 2014, and updated board & committees list			Dispute Resolution Center
2-18-14	Notice of marijuana license application from WA ST Liquor Control Board	The Heights Conservatory, 410 Elk Pond Rd Ste B, Cle Elum, WA, Timothy James Betts, Jessica Elizabeth Jasper for marijuana producer tier 3	BOCC, CDS, SO, PA		Comment file
2-18-14	Notice of marijuana license application from WA ST Liquor Control Board	Hydro Light, 340 Powerline Rd Ste B, Cle Elum, WA, Clifford H & Lea I Hughes, for marijuana processor	BOCC, CDS, SO, PA		Comment file
2-19-14	Email from Lori Brown, Director of SE WA Aging & Long Term Care	Thank you for supporting the ILA for SE WA ALTC COG	BOCC		ALTC
2-19-14	Public notice, public hearing from ALTC	For March 14, 9:30-10:30 am @ Hal Holmes, 209 N Ruby St Ellensburg	BOCC		ALTC
2-20-14	Article dropped off in the office	Re: Obama's EPA dealing with city of Riverton, Wyoming and Indian issues, & part of 1855 treaty	BOCC		Miscellaneous
2-20-14	Email from Mike Graham, Natural Mystic Farms	New I-502 production size limitations	BOCC, SO, PA, CDS		Comment file
2-21-14	Email from Victor Dickson	Concerns on zoning in regard to marijuana operations	BOCC, CDS, PA, SO		Comment file
2-21-14	Email from Bryan Jackson, DOL	Re: Scrap Metal Business Licensing	BOCC		WA ST Department of Licensing
2-21-14	Letter from Director Yomoyuki Yokomizo, Sanda City, Japan	Questions on Sanda Little Senior visiting Kittitas County			Sanda City
2-21-14	Lorman Education Services training notice	Water Rights Sales & Transfers in WA training in Spokane May 1, 2014			BOCC



Kittitas County, Washington
BOARD OF COUNTY COMMISSIONERS

District One
Paul Jewell

District Two
Gary Berndt

District Three
Obie O'Brien

February 24, 2014

Ms. Beryl Kelley
1391 Reecer Creek Road
Ellensburg, WA 98926

Re: Noise Ordinance - Waiver

Dear Ms. Kelley,

On February 24, 2014 the Kittitas County Board of Commissioners granted your request for a waiver to Kittitas County Code Chapter 9.45 (Noise), for March 22, 2014; November 1, 2014 & December 31, 2014 until midnight.

This waiver was granted on the information provided to the Board of County Commissioners for a private party at your residence located at 1391 Reecer Creek Road Ellensburg, WA 98926.

Our office will notify the Kittitas County Sheriff's office and KITTCOM of the waiver, but please note that the waiver was only granted for **March 22, 2014; November 1, 2014 & December 31, 2014 until midnight** and with the condition of you notifying your neighbors of the party that are within a 500 feet radius of your address. The Board asked that you provide them a listing of notified neighbors within two weeks prior to each of the three events no later than 5:00 p.m. The Board of County Commissioners Office staff will route the address list to the County Sheriff's office.

If you have any questions, please free to contact our office at your convenience. Thank you.

Sincerely,

Mandy Buchholz
Deputy Clerk of the Board

cc: Sheriff's Dept.
Code Enforcement
Prosecutor
KITTCOM

Beryl Kelley
1391 Reecer Creek Road
Ellensburg, WA 98926

February 13, 2014

Kittitas County Board of Commissioners
205 W 5th Ave Suite 108
Ellensburg WA 98926

Dear Commissioners,

I am applying to the board for a noise ordinance variance for a private party at my home on the following dates in 2014:

- March 22
- November 1
- December 31

I am expecting about 30 adult guests between 6 pm and 12 am. There will be live amplified music indoors. My property can accommodate off street parking, and there will be no vehicles parked on Reecer Creek Road. I will provide portable toilets and trash bins for the expected number of guests. Admission is limited to personal invitation, and the event is not open to the general public.

As per previous variances in 2013, I will inform neighbors of the event dates at least 2 weeks prior to the event, and I will send letters of completion to Kittitas County.

Thank you for your consideration.

Beryl Kelley
925-1982

RECEIVED

FEB 14 2014

1st *K* 2nd *K* 3rd *K*
COUNTY BOARD OF CLERKS
Sheriff



GENE DANA, SHERIFF
KITTITAS COUNTY SHERIFF'S OFFICE

307 W. Umptanum Rd. ♦ Ellensburg, WA 98926
(509) 962-7525 ♦ (509) 674-2584
FAX (509) 962-7599

February 18, 2014

Kittitas County Board of County Commissioners
205 West 5th Ave., Suite 108
Ellensburg, WA 98926

Re: Noise Ordinance Variance Request – Beryl Kelley

Dear Board of County Commissioners,

I have reviewed the noise variance request for a private party on March 22nd, November 1st and December 31st at Mr. Beryl Kelley's residence on Reecer Creek Road.

I suggest allowing a variance to be no later than midnight for these events. Applicant might also reduce complaints to my office by dropping off a note or flyer to those homes most affected in his neighborhood.

The Kittitas County Sheriff's Office has no objections to this request.

Sincerely,

Gene Dana,
Sheriff

A handwritten signature in black ink, appearing to read "Gene Dana".

RECEIVED
FEB 19 2014
1st 2nd 3rd
KITTITAS COUNTY BOARD OF COMMISSIONERS