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

Special Districts - Government Compensation Report - Calendar Year 2019

Refer to the 2019 GCC Reporting Instructions for more details

Entity Name	e Santa Clara - Saratoga Fire Protection District							
Human Resources Web Page	saratogafire.org							
Employees Hold more than One Position?		(Enter 'Yes' or 'No')	'Save As' Filename	2019-12074309300.xlsx				
Do the amounts in the Defined Benefit Plan column include payment toward								
the pension unfunded liability	No	(Enter 'Yes' or 'No')						

## Preparer Contact Information

Preparer Name	Trina Whitley
Phone Number	408-867-9001
E-mail Address	twhitley@saratogafire.org

"	Employer Contribution:	"
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							Total Wages Subject to Medicare (Box 5 of W-2):			Retirement Plan:			Deferred		
	Elected			Multiple							Applicable	Employees'	Defined Benefit	Compensation	Health,
	Position			Positions	<b>Annual Salary</b>	<b>Annual Salary</b>	Annual				<b>Defined Benefit</b>	Share Paid by	Plan: Employer's	/Defined	Dental,
Line #	Enter 'Y'	Department	Classification	Footnote	Minimum	Maximum	Regular Pay	<b>Overtime Pay</b>	<b>Lump Sum Pay</b>	Other Pay	Pension Formula	Employer	Share	<b>Contribution Plan</b>	Vision
1.		Administration	Business Manager			123,538	123,538								
2.		Administration	Commissioner												2,304
3.		Administration	Commissioner												2,304
4.		Administration	Commissioner												2,304