## **Snohomish County Council**



## Legislation Text

| File #: 2022-0954, Version: 1   |                                       |                   |                           |
|---|---------------------------------------|-------------------|---------------------------|
| Executi   | ve/Council Actior                     | n Form (ECAF)     |                           |
| ITEM TITLE: Motion 22-395, approving a reclassification DEPARTMENT: COUNCIL   | n within the Council                  | I                 |                           |
| ORIGINATOR: HEIDI BEAZIZO   |                                       |                   |                           |
| EXECUTIVE RECOMMENDATION: n/a   |                                       |                   |                           |
| PURPOSE: request Council consider recla exempt.   | assifying COU7670                     | R from classified | d exempt to managemen     |
| BACKGROUND: An analysis of Council's was both necessary and appropriate to re-<br>Administrative Assistant (Management Exe<br>Supports the reclass of Reina Barber, posit | align the Administrempt). HR has revi | ative Specialist  | (Classified Exempt) to an |
| <b>EXPEND</b> : FUND, AGY, ORG, ACTY, OBJ, AU   | CURRENT YR                            | 2ND YR            | 1ST 6 YRS                 |
|   | 1,312                                 | 3,936             | 23,616                    |
|   |                                       |                   |                           |
|   |                                       |                   |                           |
| TOTAL   | 1,312                                 | 3,936             | 23,616                    |
| REVENUE: FUND, AGY, ORG, REV, SOURCE  | CURRENT YR                            | 2ND YR            | 1ST 6 YRS                 |
|   |                                       |                   |                           |
|   |                                       | <del>-  </del>    |                           |
|   |                                       |                   |                           |
| TOTAL   |                                       |                   |                           |
| TOTAL  DEPARTMENT FISCAL IMPACT NOTES:  | : N/A                                 |                   |                           |
|   | : N/A                                 | AMOUNT            | _                         |

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|-------------------------------|-------|-----|--|--|--|--|
| Contract Period ORIGINAL      | START | END |  |  |  |  |
| AMENDMENT                     | START | END |  |  |  |  |

OTHER DEPARTMENTAL REVIEW/COMMENTS: N/A