State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No') 'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
1.	Administration	Assistant Town Clerk		56,864	78,036	53,918	0	2,493	232	2% @ 55	0	5,890	0	11,768
2.	Administration	Assistant Town Manager		85,363	117,099	19,784	0	0	0	2% @ 55	0	0	0	0
3.	Administration	Assistant Town Manager		85,363	117,099	98,574	0	5,558	4,800	2% @ 55	4,270	10,241	0	6,495
4.	Administration	Deputy Town Clerk		22,088	30,318	12,208	0	210	0	2% @ 55	0	1,410	0	2,572
5.	Administration	Executive Assistant to Town Manager		33,242	45,614	35,900	75	0	0	2% @ 55	0	3,964	0	11,949
6.	Administration	Fleet Manager		55,573	76,225	48,971	0	2,324	1,500	2% @ 55	0	5,622	0	14,937
7.	Administration	Human Resources & Risk Management Analyst		28,964	39,745	27,190	4,622	0	0	2% @ 55	0	3,344	607	11,331
8.	Administration	Information Technology Manager		69,684	95,634	80,824	0	3,369	0	2% @ 55	0	8,025	0	6,499
9.	Administration	Town Clerk		69,680	95,634	90,681	0	5,254	4,800	2% @ 55	2,898	9,449	5,205	1,400
10.	Administration	Town Manager		100,776	138,230	131,462	0	7,418	1,200	2% @ 55	2,487	13,819	0	11,639
11.	Animal Control	Animal Control Officer		24,517	34,430	23,686	973	0	3,020	2% @ 55	0	3,211	0	11,790
12.	Animal Control	Animal Control Supervisor		33,117	46,515	34,271	784	6,873	3,448	2% @ 55	0	3,788	0	9,698
13.	Animal Control	Animal Shelter Assistant		7,825	10,461	6,862	0	0	0		0	0	0	0
14.	Animal Control	Animal Shelter Assistant		7,825	10,461	10,109	0	0	0		0	0	0	0
15.	Animal Control	Office Assistant III		16,535	23,200	16,734	310	0	692	2% @ 55	0	1,729	2,255	539
16.	Business and Housing	Administrative Analyst		31,492	44,250	953	0	580	0	2% @ 55	0	87	0	0
17.	Business and Housing	Administrative Analyst		31,492	44,250	4,392	0	0	0		0	0	0	0
18.	Business and Housing	Administrative Analyst		31,492	44,250	29,842	21	0	0	2% @ 55	0	2,990	0	6,521
19.	Business and Housing	Housing Coordinator		31,468	44,170	33,035	135			2% @ 55	0	3,397	0	15,045
20.	Development Services	Assistant Onsite Sanitary Official		41,085	56,370	50,020	0	2,086	5,507	2% @ 55	0	4,889	0	1,238
21.	Development Services	Assistant Planner		39,438	55,392	47,714	0	0	360	2% @ 55	0	4,720	0	6,591
22.	Development Services	Associate Engineer		65,388	89,708	44,054	0	9,730	3,036	2% @ 55	0	4,162	0	0
23.	Development Services	Building Permit Technician		23,625	33,174	16,164	49	1,715	3,060	2% @ 55	0	1,510	0	705
24.	Development Services	CDD/PW Office Supervisor		34,382	47,202	21,907	0	15,932	0	2% @ 55	0	2,124	0	3,675
25.	Development Services	CDD/PW Projects Coordinator	3	43,368	59,500	41,866	0	5,912	0	2% @ 55	0	4,097	0	9,680
26.	Development Services	Code Enforcement Officer		22,115	31,066	637	0	2,234	0	2% @ 55	0	58	0	0
27.	Development Services	Community Development Director		69,680	95,634	17,810	0	0	0		0	0	0	0
28.	Development Services	Community Development Director		69,680	95,634	72,120	0	4,538	4,800	2% @ 55	3,487	8,363	0	14,933
29.	Development Services	Construction Inspector		32,627	45,783	39,792	1,529	0	5,506	2% @ 55	0	3,880	0	1,317

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No') 'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Wages Subject to Medicare (Box 5 of W-2): Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employer Contribution: Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
30.	Development Services	Environmental Services Specialist		32,293	45,348	31,624	38	0	13	2% @ 55	0	3,464	0	14,959
31.	Development Services	Environmental Services Technician		22,895	32,124	15,413	0	1,188	0	2% @ 55	0	1,812	0	5,499
32.	Development Services	Fire Marshal/Building Official		61,121	83,837	50,413	328	467	4,641	2% @ 55	0	5,001	0	1,129
33.	Development Services	Onsite Sanitary Official		56,864	78,036	61,917	0	2,886	0	2% @ 55	0	6,766	0	14,937
34.	Development Services	Senior Building Inspector		39,438	55,392	29,242	273	0	300	2% @ 55	0	3,201	0	8,320
35.	Development Services	Senior Building Permit Technician	3	29,064	40,813	0	0	0	0	2% @ 55	0	0	0	0
36.	Development Services	Senior Code Enforcement Officer		35,645	50,025	45,848	0	0	0		0	0	4,164	97
37.	Finance	Finance Director/Treasurer		69,680	95,634	82,535	0	4,888	4,800	2% @ 55	3,749	8,997	0	14,933
38.	Finance	Finance Supervisor		56,864	78,036	66,663	0	3,031	0	2% @ 55	0	7,105	0	11,768
39.	Finance	Financial Services Clerk I		17,004	23,870	6,443	0	3,040	0	2% @ 55	0	673	0	1,301
40.	Finance	Senior Financial Services Clerk		24,553	33,665	6,492	0	332	0	2% @ 55	0	525	0	1,643
41.	Finance	Senior Financial Services Clerk		27,622	37,873	32,144	0	0	0	2% @ 55	0	3,284	0	6,499
42.	Fire Administration	Administrative Assistant II		18,535	26,015	480	0	0	0	2% @ 55	0	0	0	0
43.	Fire Administration	Administrative Assistant II		18,535	26,015	20,805	42	0	3,123	2% @ 55	0	2,025	0	0
44.	Fire Administration	Civilian Fire Prevention Inspector		16,873	23,704	8,790	208	453	291	2% @ 55	0	1,111	0	5,404
45.	Fire Administration	Civilian Fire Prevention Inspector		9,491	12,695	11,331	0	0	0		0	0	0	0
46.	Fire Administration	Fire Chief		77,397	106,165	23,477	0	10,940	1,515	3% @ 50	969	5,417	0	3,614
47.	Fire Suppression	Battalion Chief		64,951	89,122	70,237	11,506	0	6,585	3% @ 50	0	17,741	0	14,955
48.	Fire Suppression	Battalion Chief		64,951	89,122	71,491	18,138	0	6,890	3% @ 50	0	18,118	0	14,955
49.	Fire Suppression	Battalion Chief		64,951	89,122	75,020	14,104	0	7,357	3% @ 50	0	18,959	0	14,955
50.	Fire Suppression	Captain		50,266	68,963	2,273	0	5,939	2,874	3% @ 50	0	1,005	0	0
51.	Fire Suppression	Captain		50,266	68,963	54,412	7,847	0	5,452	3% @ 50	0	14,371	0	6,504
52.	Fire Suppression	Captain		50,266	68,963	56,764	22,006	0	7,626	3% @ 50	0	14,800	1,956	3,656
53.	Fire Suppression	Captain		50,266	68,963	59,147	33,654	0	5,841	3% @ 50	0	15,054	0	14,955
54.	Fire Suppression	Captain		50,266	68,963	61,428	13,778	0	5,092	3% @ 50	0	15,293	1,735	10,388
55.	Fire Suppression	Captain		50,266	68,963	63,687	37,160	0	7,041	3% @ 50	0	16,769	0	14,955
56.	Fire Suppression	Captain		50,266	68,963	67,836	70,390	0	7,085	3% @ 50	0	17,289	0	14,955
57.	Fire Suppression	Engineer		45,562	62,514	35,994	9,701	0	4,591	3% @ 50	0	10,901	0	14,955
58.	Fire Suppression	Engineer		45,562	62,514	40,364	11,994	0	4,958	3% @ 50	0	13,865	0	11,717
59.	Fire Suppression	Engineer		45,562	62,514	44,071	24,759	0	5,317	3% @ 50	0	12,386	0	5,946
60.	Fire Suppression	Engineer		45,562	62,514	47,748	26,651	0	5,121	3% @ 50	0	12,308	0	14,955

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No') 'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
61.	Fire Suppression	Engineer		45,562	62,514	49,481	23,132	0	5,237	3% @ 50	0	12,723	0	14,880
62.	Fire Suppression	Engineer		45,562	62,514	51,463	4,305	0	7,348	3% @ 50	0	12,493	3,036	1,234
63.	Fire Suppression	Engineer		45,562	62,514	55,228	7,632	0	6,727	3% @ 50	0	14,346	0	11,361
64.	Fire Suppression	Engineer		45,562	62,514	59,752	12,034	0	5,539	3% @ 50	0	15,280	0	11,660
65.	Fire Suppression	Engineer		45,562	62,514	60,519	46,299	0	6,020	3% @ 50	0	15,350	0	14,955
66.	Fire Suppression	Firefighter		39,321	53,937	10,024	1,907	2,601	2,803	3% @ 50	0	2,612	0	1,514
67.	Fire Suppression	Firefighter		39,321	53,937	25,952	4,969	0	4,616	3% @ 50	0	11,244	0	11,601
68.	Fire Suppression	Firefighter		39,321	53,937	35,800	19,203	0	4,054	3% @ 50	0	9,403	0	14,954
69.	Fire Suppression	Firefighter		39,321	53,937	36,901	12,667	0	3,981	3% @ 50	0	9,559	0	10,681
70.	Fire Suppression	Firefighter		39,321	53,937	37,438	8,332	0	8,915	3% @ 50	0	9,477	0	2,103
71.	Police Administration	Administrative Assistant III		32,489	44,555	39,988	151	0	5,205	2% @ 55	0	3,897	0	0
72.	Police Administration	Police Chief		77,397	106,165	105,856	0	25,371	7,981	3% @ 50	11,167	27,349	0	11,639
73.	Police Administration	Police Lieutenant		67,808	90,876	74,274	0	1,717	7,794	3% @ 50	0	18,823	0	6,495
74.	Police Administration	Police Lieutenant		67,808	90,876	83,380	0	512	8,382	3% @ 50	0	20,816	0	14,933
75.	Police Communications	Communication Records Supervisor		42,066	57,734	51,069	4,067	0	5,505	2% @ 55	0	5,681	0	14,955
76.	Police Communications	Community Service Officer II		24,998	35,089	27,456	5,072	0	965	2% @ 55	0	3,169	0	11,790
77.	Police Communications	Criminal Records Technician		11,812	16,587	10,681	0	0	0		0	0	0	0
78.	Police Communications	Criminal Records Technician		11,812	16,587	15,224	0	0	0		0	0	0	0
79.	Police Communications	Per Diem Dispatcher		0	0	3,799	0	0	5		0	0	0	0
80.	Police Communications	Per Diem Dispatcher		0	0	7,356	0	0	0		0	0	0	0
81.	Police Communications	Per Diem Dispatcher		0	0	7,789	0	0	162	2% @ 55	0	56	0	0
82.	Police Communications	Per Diem Dispatcher		0	0	10,528			142		0	0	0	0
83.	Police Communications	Per Diem Dispatcher		0	0	11,591	0	0	555		0	0	0	0
84.	Police Communications	Public Safety Dispatcher		32,981	42,289	30,154	736	0	4,244	2% @ 55	0	3,515	0	10,894
85.	Police Communications	Public Safety Dispatcher		32,981	42,289	32,477	3,133	0	5,619	2% @ 55	0	3,879	0	11,797
86.	Police Communications	Public Safety Dispatcher		32,981	42,289	35,717	2,408	0	10,671	2% @ 55	0	4,033	0	1,291
87.	Police Communications	Public Safety Dispatcher		32,981	42,289	38,827	1,459	0	5,307	2% @ 55	0	4,474	0	14,955
88.	Police Communications	Public Safety Dispatcher		32,981	42,289	38,834	1,155	0	4,798	2% @ 55	0	4,430	0	14,955
89.	Police Communications	Public Safety Dispatcher		32,981	42,289	39,557	2,916	0	4,378	2% @ 55	0	4,455	0	14,955
90.	Police Communications	Senior Public Safety Dispatcher		38,212	52,412	50,671	9,122	5,800	6,987	2% @ 55	0	5,592	4,771	1,839
91.	Police Operations	Community Service Officer III		35,298	49,558	38,176	5,783	0	1,178	2% @ 55	0	4,170	0	14,959
92.	Police Operations	Police Officer		44,385	60,931	29,332	14,733	7,448	4,277	3% @ 50	0	6,938	0	8,587
93.	Police Operations	Police Officer		44,385	60,931	32,468	5,469	0	4,468	3% @ 55	0	7,051	0	9,822
94.	Police Operations	Police Officer		44,385	60,931	32,947	3,311	0	5,142	3% @ 55	0	7,231	0	5,423
95.	Police Operations	Police Officer		44,385	60,931	35,144	0	1,351	3,916	3% @ 50	0	9,108	0	13,560

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No') 'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Wages Subject to Medicare (Box 5 of W-2): Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employer Contribution: Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
96.	Police Operations	Police Officer		44,385	60,931	36,683	7,156	3,530	4,975	3% @ 50	0	8,260	0	9,831
97.	Police Operations	Police Officer		44,385	60,931	40,203	3,790	0	7,794	3% @ 50	0	13,732	0	14,955
98.	Police Operations	Police Officer		44,385	60,931	43,015	9,255	0	6,547	3% @ 50	0	11,331	0	11,239
99.	Police Operations	Police Officer		44,385	60,931	43,047	6,128	0	7,131	3% @ 50	0	11,775	0	11,781
100.	Police Operations	Police Officer		44,385	60,931	43,202	9,103	0	5,955	3% @ 50	0	11,186	0	6,504
101.	Police Operations	Police Officer		44,385	60,931	43,720	19,127	0	8,491	3% @ 50	0	13,098	0	14,955
102.	Police Operations	Police Officer		44,385	60,931	46,098	9,100	0	7,852	3% @ 50	0	12,363	0	12,050
103.	Police Operations	Police Officer		44,385	60,931	49,624	13,113	0	9,029	3% @ 50	0	13,375	0	14,955
104.	Police Operations	Police Officer		44,385	60,931	52,667	6,827	0	9,162	3% @ 50	0	14,029	0	14,880
105.	Police Operations	Police Officer		44,385	60,931	53,849	15,169	0	9,608	3% @ 50	0	14,425	0	14,955
106.	Police Operations	Police Officer		44,385	60,931	53,849	12,163	0	9,403	3% @ 50	0	14,428	0	14,955
107.	Police Operations	Police Officer		44,385	60,931	54,264	7,533	0	5,075	3% @ 50	0	13,511	0	14,955
108.	Police Operations	Police Sergeant		52,362	71,843	0	0	9,054	2,622	3% @ 50	0	7,451	0	5,875
109.	Police Operations	Police Sergeant		52,362	71,843	13,066	331	4,420	2,668	3% @ 50	0	5,563	0	6,101
110.	Police Operations	Police Sergeant		52,362	71,843	48,760	6,725	0	7,876	3% @ 50	0	12,922	0	14,880
111.	Police Operations	Police Sergeant		52,362	71,843	55,212	20,145	0	10,185	3% @ 50	0	14,879	0	14,955
112.	Police Operations	Police Sergeant		52,362	71,843	59,453	10,276	0	9,841	3% @ 50	0	15,594	0	6,504
113.	Police Operations	Police Sergeant		52,362	71,843	60,858	17,212	0	10,168	3% @ 50	0	17,488	0	14,955
114.	Police Operations	Police Sergeant		52,362	71,843	70,303	29,660	0	7,379	3% @ 50	0	17,172	5,213	1,355
115.	Public Works	Assistant Public Works Director		56,864	78,036	62,367	0	2,618	459	2% @ 55	0	6,220	0	11,768
116.	Public Works	Public Works Director/Town Engineer		69,680	95,634	68,328	0	31,732	3,600	2% @ 55	2,324	7,274	0	11,074
117.	Public Works	Public Works Maintenance Supervisor	1	51,584	70,792	60,057	243	0	2,294	2% @ 55	0	5,765	0	14,673
118.	Public Works	Public Works Maintenance Worker I	4	29,378	41,253	0	0	0	0	2% @ 55	0	0	0	0
119.	Public Works	Public Works Maintenance Worker I		29,378	41,253	16,800	573	4,412	2,386	2% @ 55	0	1,580	3,036	622
120.	Public Works	Public Works Maintenance Worker II	2	30,869	43,335	0	0	0	0	2% @ 55	0	0	0	0
121.	Public Works	Public Works Maintenance Worker II		30,869	43,335	31,343	832	0	4,975	2% @ 55	0	3,691	0	11,790
122.	Public Works	Public Works Maintenance Worker II	4	30,869	43,335	31,985	359	0	8,729	2% @ 55	0	3,134	0	0
123.	Public Works	Public Works Maintenance Worker II		30,869	43,335	36,414	1,963	0	6,901	2% @ 55	0	3,866	0	6,521

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No') 'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Wages Subject to Medicare (Box 5 of W-2): Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employer Contribution: Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
124.	Public Works	Public Works Maintenance Worker III	1	34,052	47,819	0	0	0	0	2% @ 55	0	0	0	0
125.	Public Works	Public Works Maintenance Worker III	2	34,052	47,819	32,258	639	0	4,658	2% @ 55	0	4,024	0	14,653
126.	Town Council	Council Member		3,600	3,600	3,600	0	0	1,080		0	0	0	0
127.	Town Council	Council Member		3,600	3,600	3,600	0	0	1,080		0	0	0	0
128.	Town Council	Council Member		3,600	3,600	3,600	0	0	1,080		0	0	0	0
129.	Town Council	Council Member		3,600	3,600	3,600	0	0	1,080		0	0	0	0
130.	Town Council	Council Member		3,600	3,600	3,600	0	0	1,080		0	0	0	0
131.														
132.														
133.														
134.														
135.														
136.														
137.														
138.														
139.														
140.														
141.														
142.														
143.														
144.														
145.														
146.														
147.														
148.														
149.														
150.														
151.														
152.														
153.														
154.														
155.														
156.														
157.														
158.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
159.														
160.														
161.														
162.														
163.														
164.														
165.														
166.														
167.														
168.														
169.														
170.														
171.														
172.														
173.														
174.														
175.														
176.														
177.														
178.														
179.														
180.														
181.														
182.														
183.														
184.														
185.														
186.														
187.														
188.														
189.														
190.														
191.														
192.														
193.														
194.														
195.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
196.														
197.														
198.														
199.														
200.														
201.														
202.														
203.														
204.														
205.														
206.														
207.														
208.														
209.														
210.														
211.														
212.														
213.														
214.														
215.														
216.														
217.														
218.														
219.														
220.														
221.														
222.														
223.														
224.														
225.														
226.														
227.														
228.														
229.														
230.														
231.														
232.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
233.														
234.														
235.														
236.														
237.														
238.														
239.														
240.														
241.														
242.														
243.														
244.														
245.														
246.														
247.														
248.														
249.														
250.														
251.														
252.														
253.														
254.														
255.														
256.														
257.														
258.														
259.														
260.														
261.														
262.														
263.														
264.														
265.														
266.														
267.														
268.														
269.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
270.														
271.														
272.														
273.														
274.														
275.														
276.														
277.														
278.														
279.														
280.														
281.														
282.														
283.														
284.														
285.														
286.														
287.														
288.														
289.														
290.														
291.														
292.														
293.														
294.														
295.														
296.														
297.														
298.														
299.														
300.														
301.														
302.														
303.														
304.														
305.														
306.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
307.														
308.														
309.														
310.														
311.														
312.														
313.														
314.														
315.														
316.														
317.														
318.														
319.														
320.														
321.														
322.														
323.														
324.														
325.														
326.														
327.														
328.														
329.														
330.														
331.														
332.														
333.														
334.														
335.														
336.														
337.														
338.														
339.														
340.														
341.														
342.														
343.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	- - -Total Wages Subject to Medicare (Box 5 of W-2): - - - Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - - Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
344.														
345.														
346.														
347.														
348.														
349.														
350.														
351.														
352.														
353.														
354.														
355.														
356.														
357.														
358.														
359.														
360.														
361.														
362.														
363.														
364.														
365.														
366.														
367.														
368.														
369.														
370.														
371.														
372.														
373.														
374.														
375.														
376.														
377.														
378.														
379.														
380.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
381.														
382.														
383.														
384.														
385.														
386.														
387.														
388.														
389.														
390.														
391.														
392.														
393.														
394.														
395.														
396.														
397.														
398.														
399.														
400.														
401.														
402.														
403.														
404.														
405.														
406.														
407.														
408.														
409.														
410.														
411.														
412.														
413.														
414.														
415.														
416.														
417.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
418.														
419.														
420.														
421.														
422.														
423.														
424.														
425.														
426.														
427.														
428.														
429.														
430.														
431.														
432.														
433.														
434.														
435.														
436.														
437.														
438.														
439.														
440.														
441.														
442.														
443.														
444.														
445.														
446.														
447.														
448.														
449.														
450.														
451.														
452.														
453.														
454.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
455.														
456.														
457.														
458.														
459.														
460.														
461.														
462.														
463.														
464.														
465.														
466.														
467.														
468.														
469.														
470.														
471.														
472.														
473.														
474.														
475.														
476.														
477.														
478.														
479.														
480.														
481.														
482.														
483.														
484.														
485.														
486.														
487.														
488.														
489.														
490.														
491.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
492.														
493.														
494.														
495.														
496.														
497.														
498.														
499.														
500.														
501.														
502.														
503.														
504.														
505.														
506.														
507.														
508.														
509.														
510.														
511.														
512.														
513.														
514.														
515.														
516.														
517.														
518.														
519.														
520.														
521.														
522.														
523.														
524.														
525.														
526.														
527.														
528.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
529.														
530.														
531.														
532.														
533.														
534.														
535.														
536.														
537.														
538.														
539.														
540.														
541.														
542.														
543.														
544.														
545.														
546.														
547.														
548.														
549.														
550.														
551.														
552.														
553.														
554.														
555.														
556.														
557.														
558.														
559.														
560.														
561.														
562.														
563.														
564.														
565.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
566.														
567.														
568.														
569.														
570.														
571.														
572.														
573.														
574.														
575.														
576.														
577.														
578.														
579.														
580.														
581.														
582.														
583.														
584.														
585.														
586.														
587.														
588.														
589.														
590.														
591.														
592.														
593.														
594.														
595.														
596.														
597.														
598.														
599.														
600.														
601.														
602.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
603.														
604.														
605.														
606.														
607.														
608.														
609.														
610.														
611.														
612.														
613.														
614.														
615.														
616.														
617.														
618.														
619.														
620.														
621.														
622.														
623.														
624.														
625.														
626.														
627.														
628.														
629.														
630.														
631.														
632.														
633.														
634.														
635.														
636.														
637.														
638.														
639.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
640.														
641.														
642.														
643.														
644.														
645.														
646.														
647.														
648.														
649.														
650.														
651.														
652.														
653.														
654.														
655.														
656.														
657.														
658.														
659.														
660.														
661.														
662.														
663.														
664.														
665.														
666.														
667.														
668.														
669.														
670.														
671.														
672.														
673.														
674.														
675.														
676.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
677.														
678.														
679.														
680.														
681.														
682.														
683.														
684.														
685.														
686.														
687.														
688.														
689.														
690.														
691.														
692.														
693.														
694.														
695.														
696.														
697.														
698.														
699.														
700.														
701.														
702.														
703.														
704.														
705.														
706.														
707.														
708.														
709.														
710.														
711.														
712.														
713.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
714.														
715.														
716.														
717.														
718.														
719.														
720.														
721.														
722.														
723.														
724.														
725.														
726.														
727.														
728.														
729.														
730.														
731.														
732.														
733.														
734.														
735.														
736.														
737.														
738.														
739.														
740.														
741.														
742.														
743.														
744.														
745.														
746.														
747.														
748.														
749.														
750.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
751.														
752.														
753.														
754.														
755.														
756.														
757.														
758.														
759.														
760.														
761.														
762.														
763.														
764.														
765.														
766.														
767.														
768.														
769.														
770.														
771.														
772.														
773.														
774.														
775.														
776.														
777.														
778.														
779.														
780.														
781.														
782.														
783.														
784.														
785.														
786.														
787.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
788.														
789.														
790.														
791.														
792.														
793.														
794.														
795.														
796.														
797.														
798.														
799.														
800.														
801.														
802.														
803.														
804.														
805.														
806.														
807.														
808.														
809.														
810.														
811.														
812.														
813.														
814.														
815.														
816.														
817.														
818.														
819.														
820.														
821.														
822.														
823.														
824.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
825.														
826.														
827.														
828.														
829.														
830.														
831.														
832.														
833.														
834.														
835.														
836.														
837.														
838.														
839.														
840.														
841.														
842.														
843.														
844.														
845.														
846.														
847.														
848.														
849.														
850.														
851.														
852.														
853.														
854.														
855.														
856.														
857.														
858.														
859.														
860.														
861.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
862.														
863.														
864.														
865.														
866.														
867.														
868.														
869.														
870.														
871.														
872.														
873.														
874.														
875.														
876.														
877.														
878.														
879.														
880.														
881.														
882.														
883.														
884.														
885.														
886.														
887.														
888.														
889.														
890.														
891.														
892.														
893.														
894.														
895.														
896.														
897.														
898.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
899.														
900.														
901.														
902.														
903.														
904.														
905.														
906.														
907.														
908.														
909.														
910.														
911.														
912.														
913.														
914.														
915.														
916.														
917.														
918.														
919.														
920.														
921.														
922.														
923.														
924.														
925.														
926.														
927.														
928.														
929.														
930.														
931.														
932.														
933.														
934.														
935.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
936.														
937.														
938.														
939.														
940.														
941.														
942.														
943.														
944.														
945.														
946.														
947.														
948.														
949.														
950.														
951.														
952.														
953.														
954.														
955.														
956.														
957.														
958.														
959.														
960.														
961.														
962.														
963.														
964.														
965.														
966.														
967.														
968.														
969.														
970.														
971.														
972.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
973.														
974.														
975.														
976.														
977.														
978.														
979.														
980.														
981.														
982.														
983.														
984.														
985.														
986.														
987.														
988.														
989.														
990.														
991.														
992.														
993.														
994.														
995.														
996.														
997.														
998.														
999.														
1000.														
1001.														
1002.														
1003.														
1004.														
1005.														
1006.														
1007.														
1008.														
1009.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
1010.														
1011.														
1012.														
1013.														
1014.														
1015.														
1016.														
1017.														
1018.														
1019.														
1020.														
1021.														
1022.														
1023.														
1024.														
1025.														
1026.														
1027.														
1028.														
1029.														
1030.														
1031.														
1032.														
1033.														
1034.														
1035.														
1036.														
1037.														
1038.														
1039.														
1040.														
1041.														
1042.														
1043.														
1044.														
1045.														
1046.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
1047.														
1048.														
1049.														
1050.														
1051.														
1052.														
1053.														
1054.														
1055.														
1056.														
1057.														
1058.														
1059.														
1060.														
1061.														
1062.														
1063.														
1064.														
1065.														
1066.														
1067.														
1068.														
1069.														
1070.														
1071.														
1072.														
1073.														
1074.														
1075.														
1076.														
1077.														
1078.														
1079.														
1080.														
1081.														
1082.														
1083.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
1084.														
1085.														
1086.														
1087.														
1088.														
1089.														
1090.														
1091.														
1092.														
1093.														
1094.														
1095.														
1096.														
1097.														
1098.														
1099.														
1100.														
1101.														
1102.														
1103.														
1104.														
1105.														
1106.														
1107.														
1108.														
1109.														
1110.														
1111.														
1112.														
1113.														
1114.														
1115.														
1116.														
1117.														
1118.														
1119.														
1120.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	- - -Total Wages Subject to Medicare (Box 5 of W-2): - - - Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - - Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
1121.														
1122.														
1123.														
1124.														
1125.														
1126.														
1127.														
1128.														
1129.														
1130.														
1131.														
1132.														
1133.														
1134.														
1135.														
1136.														
1137.														
1138.														
1139.														
1140.														
1141.														
1142.														
1143.														
1144.														
1145.														
1146.														
1147.														
1148.														
1149.														
1150.														
1151.														
1152.														
1153.														
1154.														
1155.														
1156.														
1157.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
1158.														
1159.														
1160.														
1161.														
1162.														
1163.														
1164.														
1165.														
1166.														
1167.														
1168.														
1169.														
1170.														
1171.														
1172.														
1173.														
1174.														
1175.														
1176.														
1177.														
1178.														
1179.														
1180.														
1181.														
1182.														
1183.														
1184.														
1185.														
1186.														
1187.														
1188.														
1189.														
1190.														
1191.														
1192.														
1193.														
1194.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
1195.														
1196.														
1197.														
1198.														
1199.														
1200.														
1201.														
1202.														
1203.														
1204.														
1205.														
1206.														
1207.														
1208.														
1209.														
1210.														
1211.														
1212.														
1213.														
1214.														
1215.														
1216.														
1217.														
1218.														
1219.														
1220.														
1221.														
1222.														
1223.														
1224.														
1225.														
1226.														
1227.														
1228.														
1229.														
1230.														
1231.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
1232.														
1233.														
1234.														
1235.														
1236.														
1237.														
1238.														
1239.														
1240.														
1241.														
1242.														
1243.														
1244.														
1245.														
1246.														
1247.														
1248.														
1249.														
1250.														
1251.														
1252.														
1253.														
1254.														
1255.														
1256.														
1257.														
1258.														
1259.														
1260.														
1261.														
1262.														
1263.														
1264.														
1265.														
1266.														
1267.														
1268.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
1269.														
1270.														
1271.														
1272.														
1273.														
1274.														
1275.														
1276.														
1277.														
1278.														
1279.														
1280.														
1281.														
1282.														
1283.														
1284.														
1285.														
1286.														
1287.														
1288.														
1289.														
1290.														
1291.														
1292.														
1293.														
1294.														
1295.														
1296.														
1297.														
1298.														
1299.														
1300.														
1301.														
1302.														
1303.														
1304.														
1305.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	- - -Total Wages Subject to Medicare (Box 5 of W-2): - - - Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - - Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
1306.														
1307.														
1308.														
1309.														
1310.														
1311.														
1312.														
1313.														
1314.														
1315.														
1316.														
1317.														
1318.														
1319.														
1320.														
1321.														
1322.														
1323.														
1324.														
1325.														
1326.														
1327.														
1328.														
1329.														
1330.														
1331.														
1332.														
1333.														
1334.														
1335.														
1336.														
1337.														
1338.														
1339.														
1340.														
1341.														
1342.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
1343.														
1344.														
1345.														
1346.														
1347.														
1348.														
1349.														
1350.														
1351.														
1352.														
1353.														
1354.														
1355.														
1356.														
1357.														
1358.														
1359.														
1360.														
1361.														
1362.														
1363.														
1364.														
1365.														
1366.														
1367.														
1368.														
1369.														
1370.														
1371.														
1372.														
1373.														
1374.														
1375.														
1376.														
1377.														
1378.														
1379.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
1380.														
1381.														
1382.														
1383.														
1384.														
1385.														
1386.														
1387.														
1388.														
1389.														
1390.														
1391.														
1392.														
1393.														
1394.														
1395.														
1396.														
1397.														
1398.														
1399.														
1400.														
1401.														
1402.														
1403.														
1404.														
1405.														
1406.														
1407.														
1408.														
1409.														
1410.														
1411.														
1412.														
1413.														
1414.														
1415.														
1416.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
1417.														
1418.														
1419.														
1420.														
1421.														
1422.														
1423.														
1424.														
1425.														
1426.														
1427.														
1428.														
1429.														
1430.														
1431.														
1432.														
1433.														
1434.														
1435.														
1436.														
1437.														
1438.														
1439.														
1440.														
1441.														
1442.														
1443.														
1444.														
1445.														
1446.														
1447.														
1448.														
1449.														
1450.														
1451.														
1452.														
1453.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
1454.														
1455.														
1456.														
1457.														
1458.														
1459.														
1460.														
1461.														
1462.														
1463.														
1464.														
1465.														
1466.														
1467.														
1468.														
1469.														
1470.														
1471.														
1472.														
1473.														
1474.														
1475.														
1476.														
1477.														
1478.														
1479.														
1480.														
1481.														
1482.														
1483.														
1484.														
1485.														
1486.														
1487.														
1488.														
1489.														
1490.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
1491.														
1492.														
1493.														
1494.														
1495.														
1496.														
1497.														
1498.														
1499.														
1500.														
1501.														
1502.														
1503.														
1504.														
1505.														
1506.														
1507.														
1508.														
1509.														
1510.														
1511.														
1512.														
1513.														
1514.														
1515.														
1516.														
1517.														
1518.														
1519.														
1520.														
1521.														
1522.														
1523.														
1524.														
1525.														
1526.														
1527.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
1528.														
1529.														
1530.														
1531.														
1532.														
1533.														
1534.														
1535.														
1536.														
1537.														
1538.														
1539.														
1540.														
1541.														
1542.														
1543.														
1544.														
1545.														
1546.														
1547.														
1548.														
1549.														
1550.														
1551.														
1552.														
1553.														
1554.														
1555.														
1556.														
1557.														
1558.														
1559.														
1560.														
1561.														
1562.														
1563.														
1564.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
1565.														
1566.														
1567.														
1568.														
1569.														
1570.														
1571.														
1572.														
1573.														
1574.														
1575.														
1576.														
1577.														
1578.														
1579.														
1580.														
1581.														
1582.														
1583.														
1584.														
1585.														
1586.														
1587.														
1588.														
1589.														
1590.														
1591.														
1592.														
1593.														
1594.														
1595.														
1596.														
1597.														
1598.														
1599.														
1600.														
1601.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
1602.														
1603.														
1604.														
1605.														
1606.														
1607.														
1608.														
1609.														
1610.														
1611.														
1612.														
1613.														
1614.														
1615.														
1616.														
1617.														
1618.														
1619.														
1620.														
1621.														
1622.														
1623.														
1624.														
1625.														
1626.														
1627.														
1628.														
1629.														
1630.														
1631.														
1632.														
1633.														
1634.														
1635.														
1636.														
1637.														
1638.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
1639.														
1640.														
1641.														
1642.														
1643.														
1644.														
1645.														
1646.														
1647.														
1648.														
1649.														
1650.														
1651.														
1652.														
1653.														
1654.														
1655.														
1656.														
1657.														
1658.														
1659.														
1660.														
1661.														
1662.														
1663.														
1664.														
1665.														
1666.														
1667.														
1668.														
1669.														
1670.														
1671.														
1672.														
1673.														
1674.														
1675.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
1676.														
1677.														
1678.														
1679.														
1680.														
1681.														
1682.														
1683.														
1684.														
1685.														
1686.														
1687.														
1688.														
1689.														
1690.														
1691.														
1692.														
1693.														
1694.														
1695.														
1696.														
1697.														
1698.														
1699.														
1700.														
1701.														
1702.														
1703.														
1704.														
1705.														
1706.														
1707.														
1708.														
1709.														
1710.														
1711.														
1712.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
1713.														
1714.														
1715.														
1716.														
1717.														
1718.														
1719.														
1720.														
1721.														
1722.														
1723.														
1724.														
1725.														
1726.														
1727.														
1728.														
1729.														
1730.														
1731.														
1732.														
1733.														
1734.														
1735.														
1736.														
1737.														
1738.														
1739.														
1740.														
1741.														
1742.														
1743.														
1744.														
1745.														
1746.														
1747.														
1748.														
1749.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
1750.														
1751.														
1752.														
1753.														
1754.														
1755.														
1756.														
1757.														
1758.														
1759.														
1760.														
1761.														
1762.														
1763.														
1764.														
1765.														
1766.														
1767.														
1768.														
1769.														
1770.														
1771.														
1772.														
1773.														
1774.														
1775.														
1776.														
1777.														
1778.														
1779.														
1780.														
1781.														
1782.														
1783.														
1784.														
1785.														
1786.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
1787.														
1788.														
1789.														
1790.														
1791.														
1792.														
1793.														
1794.														
1795.														
1796.														
1797.														
1798.														
1799.														
1800.														
1801.														
1802.														
1803.														
1804.														
1805.														
1806.														
1807.														
1808.														
1809.														
1810.														
1811.														
1812.														
1813.														
1814.														
1815.														
1816.														
1817.														
1818.														
1819.														
1820.														
1821.														
1822.														
1823.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
1824.														
1825.														
1826.														
1827.														
1828.														
1829.														
1830.														
1831.														
1832.														
1833.														
1834.														
1835.														
1836.														
1837.														
1838.														
1839.														
1840.														
1841.														
1842.														
1843.														
1844.														
1845.														
1846.														
1847.														
1848.														
1849.														
1850.														
1851.														
1852.														
1853.														
1854.														
1855.														
1856.														
1857.														
1858.														
1859.														
1860.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	- - -Total Wages Subject to Medicare (Box 5 of W-2): - - - Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - - Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
1861.														
1862.														
1863.														
1864.														
1865.														
1866.														
1867.														
1868.														
1869.														
1870.														
1871.														
1872.														
1873.														
1874.														
1875.														
1876.														
1877.														
1878.														
1879.														
1880.														
1881.														
1882.														
1883.														
1884.														
1885.														
1886.														
1887.														
1888.														
1889.														
1890.														
1891.														
1892.														
1893.														
1894.														
1895.														
1896.														
1897.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
1898.														
1899.														
1900.														
1901.														
1902.														
1903.														
1904.														
1905.														
1906.														
1907.														
1908.														
1909.														
1910.														
1911.														
1912.														
1913.														
1914.														
1915.														
1916.														
1917.														
1918.														
1919.														
1920.														
1921.														
1922.														
1923.														
1924.														
1925.														
1926.														
1927.														
1928.														
1929.														
1930.														
1931.														
1932.														
1933.														
1934.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
1935.														
1936.														
1937.														
1938.														
1939.														
1940.														
1941.														
1942.														
1943.														
1944.														
1945.														
1946.														
1947.														
1948.														
1949.														
1950.														
1951.														
1952.														
1953.														
1954.														
1955.														
1956.														
1957.														
1958.														
1959.														
1960.														
1961.														
1962.														
1963.														
1964.														
1965.														
1966.														
1967.														
1968.														
1969.														
1970.														
1971.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
1972.														
1973.														
1974.														
1975.														
1976.														
1977.														
1978.														
1979.														
1980.														
1981.														
1982.														
1983.														
1984.														
1985.														
1986.														
1987.														
1988.														
1989.														
1990.														
1991.														
1992.														
1993.														
1994.														
1995.														
1996.														
1997.														
1998.														
1999.														
2000.														
2001.														
2002.														
2003.														
2004.														
2005.														
2006.														
2007.														
2008.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
2009.														
2010.														
2011.														
2012.														
2013.														
2014.														
2015.														
2016.														
2017.														
2018.														
2019.														
2020.														
2021.														
2022.														
2023.														
2024.														
2025.														
2026.														
2027.														
2028.														
2029.														
2030.														
2031.														
2032.														
2033.														
2034.														
2035.														
2036.														
2037.														
2038.														
2039.														
2040.														
2041.														
2042.														
2043.														
2044.														
2045.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
2046.														
2047.														
2048.														
2049.														
2050.														
2051.														
2052.														
2053.														
2054.														
2055.														
2056.														
2057.														
2058.														
2059.														
2060.														
2061.														
2062.														
2063.														
2064.														
2065.														
2066.														
2067.														
2068.														
2069.														
2070.														
2071.														
2072.														
2073.														
2074.														
2075.														
2076.														
2077.														
2078.														
2079.														
2080.														
2081.														
2082.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
2083.														
2084.														
2085.														
2086.														
2087.														
2088.														
2089.														
2090.														
2091.														
2092.														
2093.														
2094.														
2095.														
2096.														
2097.														
2098.														
2099.														
2100.														
2101.														
2102.														
2103.														
2104.														
2105.														
2106.														
2107.														
2108.														
2109.														
2110.														
2111.														
2112.														
2113.														
2114.														
2115.														
2116.														
2117.														
2118.														
2119.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
2120.														
2121.														
2122.														
2123.														
2124.														
2125.														
2126.														
2127.														
2128.														
2129.														
2130.														
2131.														
2132.														
2133.														
2134.														
2135.														
2136.														
2137.														
2138.														
2139.														
2140.														
2141.														
2142.														
2143.														
2144.														
2145.														
2146.														
2147.														
2148.														
2149.														
2150.														
2151.														
2152.														
2153.														
2154.														
2155.														
2156.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	- - -Total Wages Subject to Medicare (Box 5 of W-2): - - - Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - - Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
2157.														
2158.														
2159.														
2160.														
2161.														
2162.														
2163.														
2164.														
2165.														
2166.														
2167.														
2168.														
2169.														
2170.														
2171.														
2172.														
2173.														
2174.														
2175.														
2176.														
2177.														
2178.														
2179.														
2180.														
2181.														
2182.														
2183.														
2184.														
2185.														
2186.														
2187.														
2188.														
2189.														
2190.														
2191.														
2192.														
2193.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
2194.														
2195.														
2196.														
2197.														
2198.														
2199.														
2200.														
2201.														
2202.														
2203.														
2204.														
2205.														
2206.														
2207.														
2208.														
2209.														
2210.														
2211.														
2212.														
2213.														
2214.														
2215.														
2216.														
2217.														
2218.														
2219.														
2220.														
2221.														
2222.														
2223.														
2224.														
2225.														
2226.														
2227.														
2228.														
2229.														
2230.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
2231.														
2232.														
2233.														
2234.														
2235.														
2236.														
2237.														
2238.														
2239.														
2240.														
2241.														
2242.														
2243.														
2244.														
2245.														
2246.														
2247.														
2248.														
2249.														
2250.														
2251.														
2252.														
2253.														
2254.														
2255.														
2256.														
2257.														
2258.														
2259.														
2260.														
2261.														
2262.														
2263.														
2264.														
2265.														
2266.														
2267.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
2268.														
2269.														
2270.														
2271.														
2272.														
2273.														
2274.														
2275.														
2276.														
2277.														
2278.														
2279.														
2280.														
2281.														
2282.														
2283.														
2284.														
2285.														
2286.														
2287.														
2288.														
2289.														
2290.														
2291.														
2292.														
2293.														
2294.														
2295.														
2296.														
2297.														
2298.														
2299.														
2300.														
2301.														
2302.														
2303.														
2304.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
2305.														
2306.														
2307.														
2308.														
2309.														
2310.														
2311.														
2312.														
2313.														
2314.														
2315.														
2316.														
2317.														
2318.														
2319.														
2320.														
2321.														
2322.														
2323.														
2324.														
2325.														
2326.														
2327.														
2328.														
2329.														
2330.														
2331.														
2332.														
2333.														
2334.														
2335.														
2336.														
2337.														
2338.														
2339.														
2340.														
2341.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
2342.														
2343.														
2344.														
2345.														
2346.														
2347.														
2348.														
2349.														
2350.														
2351.														
2352.														
2353.														
2354.														
2355.														
2356.														
2357.														
2358.														
2359.														
2360.														
2361.														
2362.														
2363.														
2364.														
2365.														
2366.														
2367.														
2368.														
2369.														
2370.														
2371.														
2372.														
2373.														
2374.														
2375.														
2376.														
2377.														
2378.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
2379.														
2380.														
2381.														
2382.														
2383.														
2384.														
2385.														
2386.														
2387.														
2388.														
2389.														
2390.														
2391.														
2392.														
2393.														
2394.														
2395.														
2396.														
2397.														
2398.														
2399.														
2400.														
2401.														
2402.														
2403.														
2404.														
2405.														
2406.														
2407.														
2408.														
2409.														
2410.														
2411.														
2412.														
2413.														
2414.														
2415.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	- - -Total Wages Subject to Medicare (Box 5 of W-2): - - - Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - - Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
2416.														
2417.														
2418.														
2419.														
2420.														
2421.														
2422.														
2423.														
2424.														
2425.														
2426.														
2427.														
2428.														
2429.														
2430.														
2431.														
2432.														
2433.														
2434.														
2435.														
2436.														
2437.														
2438.														
2439.														
2440.														
2441.														
2442.														
2443.														
2444.														
2445.														
2446.														
2447.														
2448.														
2449.														
2450.														
2451.														
2452.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
2453.														
2454.														
2455.														
2456.														
2457.														
2458.														
2459.														
2460.														
2461.														
2462.														
2463.														
2464.														
2465.														
2466.														
2467.														
2468.														
2469.														
2470.														
2471.														
2472.														
2473.														
2474.														
2475.														
2476.														
2477.														
2478.														
2479.														
2480.														
2481.														
2482.														
2483.														
2484.														
2485.														
2486.														
2487.														
2488.														
2489.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
2490.														
2491.														
2492.														
2493.														
2494.														
2495.														
2496.														
2497.														
2498.														
2499.														
2500.														
2501.														
2502.														
2503.														
2504.														
2505.														
2506.														
2507.														
2508.														
2509.														
2510.														
2511.														
2512.														
2513.														
2514.														
2515.														
2516.														
2517.														
2518.														
2519.														
2520.														
2521.														
2522.														
2523.														
2524.														
2525.														
2526.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
2527.														
2528.														
2529.														
2530.														
2531.														
2532.														
2533.														
2534.														
2535.														
2536.														
2537.														
2538.														
2539.														
2540.														
2541.														
2542.														
2543.														
2544.														
2545.														
2546.														
2547.														
2548.														
2549.														
2550.														
2551.														
2552.														
2553.														
2554.														
2555.														
2556.														
2557.														
2558.														
2559.														
2560.														
2561.														
2562.														
2563.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
2564.														
2565.														
2566.														
2567.														
2568.														
2569.														
2570.														
2571.														
2572.														
2573.														
2574.														
2575.														
2576.														
2577.														
2578.														
2579.														
2580.														
2581.														
2582.														
2583.														
2584.														
2585.														
2586.														
2587.														
2588.														
2589.														
2590.														
2591.														
2592.														
2593.														
2594.														
2595.														
2596.														
2597.														
2598.														
2599.														
2600.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
2601.														
2602.														
2603.														
2604.														
2605.														
2606.														
2607.														
2608.														
2609.														
2610.														
2611.														
2612.														
2613.														
2614.														
2615.														
2616.														
2617.														
2618.														
2619.														
2620.														
2621.														
2622.														
2623.														
2624.														
2625.														
2626.														
2627.														
2628.														
2629.														
2630.														
2631.														
2632.														
2633.														
2634.														
2635.														
2636.														
2637.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
2638.														
2639.														
2640.														
2641.														
2642.														
2643.														
2644.														
2645.														
2646.														
2647.														
2648.														
2649.														
2650.														
2651.														
2652.														
2653.														
2654.														
2655.														
2656.														
2657.														
2658.														
2659.														
2660.														
2661.														
2662.														
2663.														
2664.														
2665.														
2666.														
2667.														
2668.														
2669.														
2670.														
2671.														
2672.														
2673.														
2674.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
2675.														
2676.														
2677.														
2678.														
2679.														
2680.														
2681.														
2682.														
2683.														
2684.														
2685.														
2686.														
2687.														
2688.														
2689.														
2690.														
2691.														
2692.														
2693.														
2694.														
2695.														
2696.														
2697.														
2698.														
2699.														
2700.														
2701.														
2702.														
2703.														
2704.														
2705.														
2706.														
2707.														
2708.														
2709.														
2710.														
2711.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
2712.														
2713.														
2714.														
2715.														
2716.														
2717.														
2718.														
2719.														
2720.														
2721.														
2722.														
2723.														
2724.														
2725.														
2726.														
2727.														
2728.														
2729.														
2730.														
2731.														
2732.														
2733.														
2734.														
2735.														
2736.														
2737.														
2738.														
2739.														
2740.														
2741.														
2742.														
2743.														
2744.														
2745.														
2746.														
2747.														
2748.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
2749.														
2750.														
2751.														
2752.														
2753.														
2754.														
2755.														
2756.														
2757.														
2758.														
2759.														
2760.														
2761.														
2762.														
2763.														
2764.														
2765.														
2766.														
2767.														
2768.														
2769.														
2770.														
2771.														
2772.														
2773.														
2774.														
2775.														
2776.														
2777.														
2778.														
2779.														
2780.														
2781.														
2782.														
2783.														
2784.														
2785.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
2786.														
2787.														
2788.														
2789.														
2790.														
2791.														
2792.														
2793.														
2794.														
2795.														
2796.														
2797.														
2798.														
2799.														
2800.														
2801.														
2802.														
2803.														
2804.														
2805.														
2806.														
2807.														
2808.														
2809.														
2810.														
2811.														
2812.														
2813.														
2814.														
2815.														
2816.														
2817.														
2818.														
2819.														
2820.														
2821.														
2822.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
2823.														
2824.														
2825.														
2826.														
2827.														
2828.														
2829.														
2830.														
2831.														
2832.														
2833.														
2834.														
2835.														
2836.														
2837.														
2838.														
2839.														
2840.														
2841.														
2842.														
2843.														
2844.														
2845.														
2846.														
2847.														
2848.														
2849.														
2850.														
2851.														
2852.														
2853.														
2854.														
2855.														
2856.														
2857.														
2858.														
2859.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
2860.														
2861.														
2862.														
2863.														
2864.														
2865.														
2866.														
2867.														
2868.														
2869.														
2870.														
2871.														
2872.														
2873.														
2874.														
2875.														
2876.														
2877.														
2878.														
2879.														
2880.														
2881.														
2882.														
2883.														
2884.														
2885.														
2886.														
2887.														
2888.														
2889.														
2890.														
2891.														
2892.														
2893.														
2894.														
2895.														
2896.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
2897.														
2898.														
2899.														
2900.														
2901.														
2902.														
2903.														
2904.														
2905.														
2906.														
2907.														
2908.														
2909.														
2910.														
2911.														
2912.														
2913.														
2914.														
2915.														
2916.														
2917.														
2918.														
2919.														
2920.														
2921.														
2922.														
2923.														
2924.														
2925.														
2926.														
2927.														
2928.														
2929.														
2930.														
2931.														
2932.														
2933.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No') 'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
2934.														
2935.														
2936.														
2937.														
2938.														
2939.														
2940.														
2941.														
2942.														
2943.														
2944.														
2945.														
2946.														
2947.														
2948.														
2949.														
2950.														
2951.														
2952.														
2953.														
2954.														
2955.														
2956.														
2957.														
2958.														
2959.														
2960.														
2961.														
2962.														
2963.														
2964.														
2965.														
2966.														
2967.														
2968.														
2969.														
2970.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
2971.														
2972.														
2973.														
2974.														
2975.														
2976.														
2977.														
2978.														
2979.														
2980.														
2981.														
2982.														
2983.														
2984.														
2985.														
2986.														
2987.														
2988.														
2989.														
2990.														
2991.														
2992.														
2993.														
2994.														
2995.														
2996.														
2997.														
2998.														
2999.														
3000.														
3001.														
3002.														
3003.														
3004.														
3005.														
3006.														
3007.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
3008.														
3009.														
3010.														
3011.														
3012.														
3013.														
3014.														
3015.														
3016.														
3017.														
3018.														
3019.														
3020.														
3021.														
3022.														
3023.														
3024.														
3025.														
3026.														
3027.														
3028.														
3029.														
3030.														
3031.														
3032.														
3033.														
3034.														
3035.														
3036.														
3037.														
3038.														
3039.														
3040.														
3041.														
3042.														
3043.														
3044.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
3045.														
3046.														
3047.														
3048.														
3049.														
3050.														
3051.														
3052.														
3053.														
3054.														
3055.														
3056.														
3057.														
3058.														
3059.														
3060.														
3061.														
3062.														
3063.														
3064.														
3065.														
3066.														
3067.														
3068.														
3069.														
3070.														
3071.														
3072.														
3073.														
3074.														
3075.														
3076.														
3077.														
3078.														
3079.														
3080.														
3081.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
3082.														
3083.														
3084.														
3085.														
3086.														
3087.														
3088.														
3089.														
3090.														
3091.														
3092.														
3093.														
3094.														
3095.														
3096.														
3097.														
3098.														
3099.														
3100.														
3101.														
3102.														
3103.														
3104.														
3105.														
3106.														
3107.														
3108.														
3109.														
3110.														
3111.														
3112.														
3113.														
3114.														
3115.														
3116.														
3117.														
3118.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
3119.														
3120.														
3121.														
3122.														
3123.														
3124.														
3125.														
3126.														
3127.														
3128.														
3129.														
3130.														
3131.														
3132.														
3133.														
3134.														
3135.														
3136.														
3137.														
3138.														
3139.														
3140.														
3141.														
3142.														
3143.														
3144.														
3145.														
3146.														
3147.														
3148.														
3149.														
3150.														
3151.														
3152.														
3153.														
3154.														
3155.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
3156.														
3157.														
3158.														
3159.														
3160.														
3161.														
3162.														
3163.														
3164.														
3165.														
3166.														
3167.														
3168.														
3169.														
3170.														
3171.														
3172.														
3173.														
3174.														
3175.														
3176.														
3177.														
3178.														
3179.														
3180.														
3181.														
3182.														
3183.														
3184.														
3185.														
3186.														
3187.														
3188.														
3189.														
3190.														
3191.														
3192.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
3193.														
3194.														
3195.														
3196.														
3197.														
3198.														
3199.														
3200.														
3201.														
3202.														
3203.														
3204.														
3205.														
3206.														
3207.														
3208.														
3209.														
3210.														
3211.														
3212.														
3213.														
3214.														
3215.														
3216.														
3217.														
3218.														
3219.														
3220.														
3221.														
3222.														
3223.														
3224.														
3225.														
3226.														
3227.														
3228.														
3229.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
3230.														
3231.														
3232.														
3233.														
3234.														
3235.														
3236.														
3237.														
3238.														
3239.														
3240.														
3241.														
3242.														
3243.														
3244.														
3245.														
3246.														
3247.														
3248.														
3249.														
3250.														
3251.														
3252.														
3253.														
3254.														
3255.														
3256.														
3257.														
3258.														
3259.														
3260.														
3261.														
3262.														
3263.														
3264.														
3265.														
3266.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
3267.														
3268.														
3269.														
3270.														
3271.														
3272.														
3273.														
3274.														
3275.														
3276.														
3277.														
3278.														
3279.														
3280.														
3281.														
3282.														
3283.														
3284.														
3285.														
3286.														
3287.														
3288.														
3289.														
3290.														
3291.														
3292.														
3293.														
3294.														
3295.														
3296.														
3297.														
3298.														
3299.														
3300.														
3301.														
3302.														
3303.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
3304.														
3305.														
3306.														
3307.														
3308.														
3309.														
3310.														
3311.														
3312.														
3313.														
3314.														
3315.														
3316.														
3317.														
3318.														
3319.														
3320.														
3321.														
3322.														
3323.														
3324.														
3325.														
3326.														
3327.														
3328.														
3329.														
3330.														
3331.														
3332.														
3333.														
3334.														
3335.														
3336.														
3337.														
3338.														
3339.														
3340.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
3341.														
3342.														
3343.														
3344.														
3345.														
3346.														
3347.														
3348.														
3349.														
3350.														
3351.														
3352.														
3353.														
3354.														
3355.														
3356.														
3357.														
3358.														
3359.														
3360.														
3361.														
3362.														
3363.														
3364.														
3365.														
3366.														
3367.														
3368.														
3369.														
3370.														
3371.														
3372.														
3373.														
3374.														
3375.														
3376.														
3377.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
3378.														
3379.														
3380.														
3381.														
3382.														
3383.														
3384.														
3385.														
3386.														
3387.														
3388.														
3389.														
3390.														
3391.														
3392.														
3393.														
3394.														
3395.														
3396.														
3397.														
3398.														
3399.														
3400.														
3401.														
3402.														
3403.														
3404.														
3405.														
3406.														
3407.														
3408.														
3409.														
3410.														
3411.														
3412.														
3413.														
3414.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
3415.														
3416.														
3417.														
3418.														
3419.														
3420.														
3421.														
3422.														
3423.														
3424.														
3425.														
3426.														
3427.														
3428.														
3429.														
3430.														
3431.														
3432.														
3433.														
3434.														
3435.														
3436.														
3437.														
3438.														
3439.														
3440.														
3441.														
3442.														
3443.														
3444.														
3445.														
3446.														
3447.														
3448.														
3449.														
3450.														
3451.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
3452.														
3453.														
3454.														
3455.														
3456.														
3457.														
3458.														
3459.														
3460.														
3461.														
3462.														
3463.														
3464.														
3465.														
3466.														
3467.														
3468.														
3469.														
3470.														
3471.														
3472.														
3473.														
3474.														
3475.														
3476.														
3477.														
3478.														
3479.														
3480.														
3481.														
3482.														
3483.														
3484.														
3485.														
3486.														
3487.														
3488.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
3489.														
3490.														
3491.														
3492.														
3493.														
3494.														
3495.														
3496.														
3497.														
3498.														
3499.														
3500.														
3501.														
3502.														
3503.														
3504.														
3505.														
3506.														
3507.														
3508.														
3509.														
3510.														
3511.														
3512.														
3513.														
3514.														
3515.														
3516.														
3517.														
3518.														
3519.														
3520.														
3521.														
3522.														
3523.														
3524.														
3525.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	- - -Total Wages Subject to Medicare (Box 5 of W-2): - - - Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - - Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
3526.														
3527.														
3528.														
3529.														
3530.														
3531.														
3532.														
3533.														
3534.														
3535.														
3536.														
3537.														
3538.														
3539.														
3540.														
3541.														
3542.														
3543.														
3544.														
3545.														
3546.														
3547.														
3548.														
3549.														
3550.														
3551.														
3552.														
3553.														
3554.														
3555.														
3556.														
3557.														
3558.														
3559.														
3560.														
3561.														
3562.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
3563.														
3564.														
3565.														
3566.														
3567.														
3568.														
3569.														
3570.														
3571.														
3572.														
3573.														
3574.														
3575.														
3576.														
3577.														
3578.														
3579.														
3580.														
3581.														
3582.														
3583.														
3584.														
3585.														
3586.														
3587.														
3588.														
3589.														
3590.														
3591.														
3592.														
3593.														
3594.														
3595.														
3596.														
3597.														
3598.														
3599.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
3600.														
3601.														
3602.														
3603.														
3604.														
3605.														
3606.														
3607.														
3608.														
3609.														
3610.														
3611.														
3612.														
3613.														
3614.														
3615.														
3616.														
3617.														
3618.														
3619.														
3620.														
3621.														
3622.														
3623.														
3624.														
3625.														
3626.														
3627.														
3628.														
3629.														
3630.														
3631.														
3632.														
3633.														
3634.														
3635.														
3636.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
3637.														
3638.														
3639.														
3640.														
3641.														
3642.														
3643.														
3644.														
3645.														
3646.														
3647.														
3648.														
3649.														
3650.														
3651.														
3652.														
3653.														
3654.														
3655.														
3656.														
3657.														
3658.														
3659.														
3660.														
3661.														
3662.														
3663.														
3664.														
3665.														
3666.														
3667.														
3668.														
3669.														
3670.														
3671.														
3672.														
3673.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
3674.														
3675.														
3676.														
3677.														
3678.														
3679.														
3680.														
3681.														
3682.														
3683.														
3684.														
3685.														
3686.														
3687.														
3688.														
3689.														
3690.														
3691.														
3692.														
3693.														
3694.														
3695.														
3696.														
3697.														
3698.														
3699.														
3700.														
3701.														
3702.														
3703.														
3704.														
3705.														
3706.														
3707.														
3708.														
3709.														
3710.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
3711.														
3712.														
3713.														
3714.														
3715.														
3716.														
3717.														
3718.														
3719.														
3720.														
3721.														
3722.														
3723.														
3724.														
3725.														
3726.														
3727.														
3728.														
3729.														
3730.														
3731.														
3732.														
3733.														
3734.														
3735.														
3736.														
3737.														
3738.														
3739.														
3740.														
3741.														
3742.														
3743.														
3744.														
3745.														
3746.														
3747.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
3748.														
3749.														
3750.														
3751.														
3752.														
3753.														
3754.														
3755.														
3756.														
3757.														
3758.														
3759.														
3760.														
3761.														
3762.														
3763.														
3764.														
3765.														
3766.														
3767.														
3768.														
3769.														
3770.														
3771.														
3772.														
3773.														
3774.														
3775.														
3776.														
3777.														
3778.														
3779.														
3780.														
3781.														
3782.														
3783.														
3784.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
3785.														
3786.														
3787.														
3788.														
3789.														
3790.														
3791.														
3792.														
3793.														
3794.														
3795.														
3796.														
3797.														
3798.														
3799.														
3800.														
3801.														
3802.														
3803.														
3804.														
3805.														
3806.														
3807.														
3808.														
3809.														
3810.														
3811.														
3812.														
3813.														
3814.														
3815.														
3816.														
3817.														
3818.														
3819.														
3820.														
3821.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	- - -Total Wages Subject to Medicare (Box 5 of W-2): - - - Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - - Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
3822.														
3823.														
3824.														
3825.														
3826.														
3827.														
3828.														
3829.														
3830.														
3831.														
3832.														
3833.														
3834.														
3835.														
3836.														
3837.														
3838.														
3839.														
3840.														
3841.														
3842.														
3843.														
3844.														
3845.														
3846.														
3847.														
3848.														
3849.														
3850.														
3851.														
3852.														
3853.														
3854.														
3855.														
3856.														
3857.														
3858.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
3859.														
3860.														
3861.														
3862.														
3863.														
3864.														
3865.														
3866.														
3867.														
3868.														
3869.														
3870.														
3871.														
3872.														
3873.														
3874.														
3875.														
3876.														
3877.														
3878.														
3879.														
3880.														
3881.														
3882.														
3883.														
3884.														
3885.														
3886.														
3887.														
3888.														
3889.														
3890.														
3891.														
3892.														
3893.														
3894.														
3895.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	- - -Total Wages Subject to Medicare (Box 5 of W-2): - - - Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - - Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
3896.														
3897.														
3898.														
3899.														
3900.														
3901.														
3902.														
3903.														
3904.														
3905.														
3906.														
3907.														
3908.														
3909.														
3910.														
3911.														
3912.														
3913.														
3914.														
3915.														
3916.														
3917.														
3918.														
3919.														
3920.														
3921.														
3922.														
3923.														
3924.														
3925.														
3926.														
3927.														
3928.														
3929.														
3930.														
3931.														
3932.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
3933.														
3934.														
3935.														
3936.														
3937.														
3938.														
3939.														
3940.														
3941.														
3942.														
3943.														
3944.														
3945.														
3946.														
3947.														
3948.														
3949.														
3950.														
3951.														
3952.														
3953.														
3954.														
3955.														
3956.														
3957.														
3958.														
3959.														
3960.														
3961.														
3962.														
3963.														
3964.														
3965.														
3966.														
3967.														
3968.														
3969.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
3970.														
3971.														
3972.														
3973.														
3974.														
3975.														
3976.														
3977.														
3978.														
3979.														
3980.														
3981.														
3982.														
3983.														
3984.														
3985.														
3986.														
3987.														
3988.														
3989.														
3990.														
3991.														
3992.														
3993.														
3994.														
3995.														
3996.														
3997.														
3998.														
3999.														
4000.														
4001.														
4002.														
4003.														
4004.														
4005.														
4006.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	- - -Total Wages Subject to Medicare (Box 5 of W-2): - - - Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - - Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
4007.														
4008.														
4009.														
4010.														
4011.														
4012.														
4013.														
4014.														
4015.														
4016.														
4017.														
4018.														
4019.														
4020.														
4021.														
4022.														
4023.														
4024.														
4025.														
4026.														
4027.														
4028.														
4029.														
4030.														
4031.														
4032.														
4033.														
4034.														
4035.														
4036.														
4037.														
4038.														
4039.														
4040.														
4041.														
4042.														
4043.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
4044.														
4045.														
4046.														
4047.														
4048.														
4049.														
4050.														
4051.														
4052.														
4053.														
4054.														
4055.														
4056.														
4057.														
4058.														
4059.														
4060.														
4061.														
4062.														
4063.														
4064.														
4065.														
4066.														
4067.														
4068.														
4069.														
4070.														
4071.														
4072.														
4073.														
4074.														
4075.														
4076.														
4077.														
4078.														
4079.														
4080.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name	Paradise
Human Resources Web Page	http//townofpardise.com/index.php/departments/humanresources/home
Employees Hold more than One Position?	Yes (Enter 'Yes' or 'No')
'Save As' Filename	2011-11980463000.xlsx

Preparer Contact Information

Preparer Name	Gina Will
Phone Number	(530) 872-6212
E-mail Address	gwill@townofparadise.com

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
4081.														
4082.														
4083.														
4084.														
4085.														
4086.														
4087.														
4088.														
4089.														
4090.														
4091.														
4092.														
4093.														
4094.														
4095.														
4096.														
4097.														
4098.														
4099.														
4100.														
4101.														
4102.														
4103.														
4104.														
4105.														
4106.														
4107.														
4108.														
4109.														
4110.														
4111.														
4112.														
4113.														
4114.														
4115.														
4116.														
4117.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	- - -Total Wages Subject to Medicare (Box 5 of W-2): - - - Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - - Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
4118.														
4119.														
4120.														
4121.														
4122.														
4123.														
4124.														
4125.														
4126.														
4127.														
4128.														
4129.														
4130.														
4131.														
4132.														
4133.														
4134.														
4135.														
4136.														
4137.														
4138.														
4139.														
4140.														
4141.														
4142.														
4143.														
4144.														
4145.														
4146.														
4147.														
4148.														
4149.														
4150.														
4151.														
4152.														
4153.														
4154.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
4155.														
4156.														
4157.														
4158.														
4159.														
4160.														
4161.														
4162.														
4163.														
4164.														
4165.														
4166.														
4167.														
4168.														
4169.														
4170.														
4171.														
4172.														
4173.														
4174.														
4175.														
4176.														
4177.														
4178.														
4179.														
4180.														
4181.														
4182.														
4183.														
4184.														
4185.														
4186.														
4187.														
4188.														
4189.														
4190.														
4191.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
4192.														
4193.														
4194.														
4195.														
4196.														
4197.														
4198.														
4199.														
4200.														
4201.														
4202.														
4203.														
4204.														
4205.														
4206.														
4207.														
4208.														
4209.														
4210.														
4211.														
4212.														
4213.														
4214.														
4215.														
4216.														
4217.														
4218.														
4219.														
4220.														
4221.														
4222.														
4223.														
4224.														
4225.														
4226.														
4227.														
4228.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
4229.														
4230.														
4231.														
4232.														
4233.														
4234.														
4235.														
4236.														
4237.														
4238.														
4239.														
4240.														
4241.														
4242.														
4243.														
4244.														
4245.														
4246.														
4247.														
4248.														
4249.														
4250.														
4251.														
4252.														
4253.														
4254.														
4255.														
4256.														
4257.														
4258.														
4259.														
4260.														
4261.														
4262.														
4263.														
4264.														
4265.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
4266.														
4267.														
4268.														
4269.														
4270.														
4271.														
4272.														
4273.														
4274.														
4275.														
4276.														
4277.														
4278.														
4279.														
4280.														
4281.														
4282.														
4283.														
4284.														
4285.														
4286.														
4287.														
4288.														
4289.														
4290.														
4291.														
4292.														
4293.														
4294.														
4295.														
4296.														
4297.														
4298.														
4299.														
4300.														
4301.														
4302.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
4303.														
4304.														
4305.														
4306.														
4307.														
4308.														
4309.														
4310.														
4311.														
4312.														
4313.														
4314.														
4315.														
4316.														
4317.														
4318.														
4319.														
4320.														
4321.														
4322.														
4323.														
4324.														
4325.														
4326.														
4327.														
4328.														
4329.														
4330.														
4331.														
4332.														
4333.														
4334.														
4335.														
4336.														
4337.														
4338.														
4339.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
4340.														
4341.														
4342.														
4343.														
4344.														
4345.														
4346.														
4347.														
4348.														
4349.														
4350.														
4351.														
4352.														
4353.														
4354.														
4355.														
4356.														
4357.														
4358.														
4359.														
4360.														
4361.														
4362.														
4363.														
4364.														
4365.														
4366.														
4367.														
4368.														
4369.														
4370.														
4371.														
4372.														
4373.														
4374.														
4375.														
4376.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
4377.														
4378.														
4379.														
4380.														
4381.														
4382.														
4383.														
4384.														
4385.														
4386.														
4387.														
4388.														
4389.														
4390.														
4391.														
4392.														
4393.														
4394.														
4395.														
4396.														
4397.														
4398.														
4399.														
4400.														
4401.														
4402.														
4403.														
4404.														
4405.														
4406.														
4407.														
4408.														
4409.														
4410.														
4411.														
4412.														
4413.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
4414.														
4415.														
4416.														
4417.														
4418.														
4419.														
4420.														
4421.														
4422.														
4423.														
4424.														
4425.														
4426.														
4427.														
4428.														
4429.														
4430.														
4431.														
4432.														
4433.														
4434.														
4435.														
4436.														
4437.														
4438.														
4439.														
4440.														
4441.														
4442.														
4443.														
4444.														
4445.														
4446.														
4447.														
4448.														
4449.														
4450.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
4451.														
4452.														
4453.														
4454.														
4455.														
4456.														
4457.														
4458.														
4459.														
4460.														
4461.														
4462.														
4463.														
4464.														
4465.														
4466.														
4467.														
4468.														
4469.														
4470.														
4471.														
4472.														
4473.														
4474.														
4475.														
4476.														
4477.														
4478.														
4479.														
4480.														
4481.														
4482.														
4483.														
4484.														
4485.														
4486.														
4487.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
4488.														
4489.														
4490.														
4491.														
4492.														
4493.														
4494.														
4495.														
4496.														
4497.														
4498.														
4499.														
4500.														
4501.														
4502.														
4503.														
4504.														
4505.														
4506.														
4507.														
4508.														
4509.														
4510.														
4511.														
4512.														
4513.														
4514.														
4515.														
4516.														
4517.														
4518.														
4519.														
4520.														
4521.														
4522.														
4523.														
4524.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	- - -Total Wages Subject to Medicare (Box 5 of W-2): - - - Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - - Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
4525.														
4526.														
4527.														
4528.														
4529.														
4530.														
4531.														
4532.														
4533.														
4534.														
4535.														
4536.														
4537.														
4538.														
4539.														
4540.														
4541.														
4542.														
4543.														
4544.														
4545.														
4546.														
4547.														
4548.														
4549.														
4550.														
4551.														
4552.														
4553.														
4554.														
4555.														
4556.														
4557.														
4558.														
4559.														
4560.														
4561.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
4562.														
4563.														
4564.														
4565.														
4566.														
4567.														
4568.														
4569.														
4570.														
4571.														
4572.														
4573.														
4574.														
4575.														
4576.														
4577.														
4578.														
4579.														
4580.														
4581.														
4582.														
4583.														
4584.														
4585.														
4586.														
4587.														
4588.														
4589.														
4590.														
4591.														
4592.														
4593.														
4594.														
4595.														
4596.														
4597.														
4598.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
4599.														
4600.														
4601.														
4602.														
4603.														
4604.														
4605.														
4606.														
4607.														
4608.														
4609.														
4610.														
4611.														
4612.														
4613.														
4614.														
4615.														
4616.														
4617.														
4618.														
4619.														
4620.														
4621.														
4622.														
4623.														
4624.														
4625.														
4626.														
4627.														
4628.														
4629.														
4630.														
4631.														
4632.														
4633.														
4634.														
4635.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
4636.														
4637.														
4638.														
4639.														
4640.														
4641.														
4642.														
4643.														
4644.														
4645.														
4646.														
4647.														
4648.														
4649.														
4650.														
4651.														
4652.														
4653.														
4654.														
4655.														
4656.														
4657.														
4658.														
4659.														
4660.														
4661.														
4662.														
4663.														
4664.														
4665.														
4666.														
4667.														
4668.														
4669.														
4670.														
4671.														
4672.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
4673.														
4674.														
4675.														
4676.														
4677.														
4678.														
4679.														
4680.														
4681.														
4682.														
4683.														
4684.														
4685.														
4686.														
4687.														
4688.														
4689.														
4690.														
4691.														
4692.														
4693.														
4694.														
4695.														
4696.														
4697.														
4698.														
4699.														
4700.														
4701.														
4702.														
4703.														
4704.														
4705.														
4706.														
4707.														
4708.														
4709.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
4710.														
4711.														
4712.														
4713.														
4714.														
4715.														
4716.														
4717.														
4718.														
4719.														
4720.														
4721.														
4722.														
4723.														
4724.														
4725.														
4726.														
4727.														
4728.														
4729.														
4730.														
4731.														
4732.														
4733.														
4734.														
4735.														
4736.														
4737.														
4738.														
4739.														
4740.														
4741.														
4742.														
4743.														
4744.														
4745.														
4746.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	- - -Total Wages Subject to Medicare (Box 5 of W-2): - - - Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - - Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
4747.														
4748.														
4749.														
4750.														
4751.														
4752.														
4753.														
4754.														
4755.														
4756.														
4757.														
4758.														
4759.														
4760.														
4761.														
4762.														
4763.														
4764.														
4765.														
4766.														
4767.														
4768.														
4769.														
4770.														
4771.														
4772.														
4773.														
4774.														
4775.														
4776.														
4777.														
4778.														
4779.														
4780.														
4781.														
4782.														
4783.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
4784.														
4785.														
4786.														
4787.														
4788.														
4789.														
4790.														
4791.														
4792.														
4793.														
4794.														
4795.														
4796.														
4797.														
4798.														
4799.														
4800.														
4801.														
4802.														
4803.														
4804.														
4805.														
4806.														
4807.														
4808.														
4809.														
4810.														
4811.														
4812.														
4813.														
4814.														
4815.														
4816.														
4817.														
4818.														
4819.														
4820.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
4821.														
4822.														
4823.														
4824.														
4825.														
4826.														
4827.														
4828.														
4829.														
4830.														
4831.														
4832.														
4833.														
4834.														
4835.														
4836.														
4837.														
4838.														
4839.														
4840.														
4841.														
4842.														
4843.														
4844.														
4845.														
4846.														
4847.														
4848.														
4849.														
4850.														
4851.														
4852.														
4853.														
4854.														
4855.														
4856.														
4857.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
4858.														
4859.														
4860.														
4861.														
4862.														
4863.														
4864.														
4865.														
4866.														
4867.														
4868.														
4869.														
4870.														
4871.														
4872.														
4873.														
4874.														
4875.														
4876.														
4877.														
4878.														
4879.														
4880.														
4881.														
4882.														
4883.														
4884.														
4885.														
4886.														
4887.														
4888.														
4889.														
4890.														
4891.														
4892.														
4893.														
4894.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
4895.														
4896.														
4897.														
4898.														
4899.														
4900.														
4901.														
4902.														
4903.														
4904.														
4905.														
4906.														
4907.														
4908.														
4909.														
4910.														
4911.														
4912.														
4913.														
4914.														
4915.														
4916.														
4917.														
4918.														
4919.														
4920.														
4921.														
4922.														
4923.														
4924.														
4925.														
4926.														
4927.														
4928.														
4929.														
4930.														
4931.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	- - -Total Wages Subject to Medicare (Box 5 of W-2): - - - Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - - Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
4932.														
4933.														
4934.														
4935.														
4936.														
4937.														
4938.														
4939.														
4940.														
4941.														
4942.														
4943.														
4944.														
4945.														
4946.														
4947.														
4948.														
4949.														
4950.														
4951.														
4952.														
4953.														
4954.														
4955.														
4956.														
4957.														
4958.														
4959.														
4960.														
4961.														
4962.														
4963.														
4964.														
4965.														
4966.														
4967.														
4968.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
4969.														
4970.														
4971.														
4972.														
4973.														
4974.														
4975.														
4976.														
4977.														
4978.														
4979.														
4980.														
4981.														
4982.														
4983.														
4984.														
4985.														
4986.														
4987.														
4988.														
4989.														
4990.														
4991.														
4992.														
4993.														
4994.														
4995.														
4996.														
4997.														
4998.														
4999.														
5000.														
5001.														
5002.														
5003.														
5004.														
5005.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
5006.														
5007.														
5008.														
5009.														
5010.														
5011.														
5012.														
5013.														
5014.														
5015.														
5016.														
5017.														
5018.														
5019.														
5020.														
5021.														
5022.														
5023.														
5024.														
5025.														
5026.														
5027.														
5028.														
5029.														
5030.														
5031.														
5032.														
5033.														
5034.														
5035.														
5036.														
5037.														
5038.														
5039.														
5040.														
5041.														
5042.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
5043.														
5044.														
5045.														
5046.														
5047.														
5048.														
5049.														
5050.														
5051.														
5052.														
5053.														
5054.														
5055.														
5056.														
5057.														
5058.														
5059.														
5060.														
5061.														
5062.														
5063.														
5064.														
5065.														
5066.														
5067.														
5068.														
5069.														
5070.														
5071.														
5072.														
5073.														
5074.														
5075.														
5076.														
5077.														
5078.														
5079.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
5080.														
5081.														
5082.														
5083.														
5084.														
5085.														
5086.														
5087.														
5088.														
5089.														
5090.														
5091.														
5092.														
5093.														
5094.														
5095.														
5096.														
5097.														
5098.														
5099.														
5100.														
5101.														
5102.														
5103.														
5104.														
5105.														
5106.														
5107.														
5108.														
5109.														
5110.														
5111.														
5112.														
5113.														
5114.														
5115.														
5116.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
5117.														
5118.														
5119.														
5120.														
5121.														
5122.														
5123.														
5124.														
5125.														
5126.														
5127.														
5128.														
5129.														
5130.														
5131.														
5132.														
5133.														
5134.														
5135.														
5136.														
5137.														
5138.														
5139.														
5140.														
5141.														
5142.														
5143.														
5144.														
5145.														
5146.														
5147.														
5148.														
5149.														
5150.														
5151.														
5152.														
5153.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	- - -Total Wages Subject to Medicare (Box 5 of W-2): - - - Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - - Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
5154.														
5155.														
5156.														
5157.														
5158.														
5159.														
5160.														
5161.														
5162.														
5163.														
5164.														
5165.														
5166.														
5167.														
5168.														
5169.														
5170.														
5171.														
5172.														
5173.														
5174.														
5175.														
5176.														
5177.														
5178.														
5179.														
5180.														
5181.														
5182.														
5183.														
5184.														
5185.														
5186.														
5187.														
5188.														
5189.														
5190.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
5191.														
5192.														
5193.														
5194.														
5195.														
5196.														
5197.														
5198.														
5199.														
5200.														
5201.														
5202.														
5203.														
5204.														
5205.														
5206.														
5207.														
5208.														
5209.														
5210.														
5211.														
5212.														
5213.														
5214.														
5215.														
5216.														
5217.														
5218.														
5219.														
5220.														
5221.														
5222.														
5223.														
5224.														
5225.														
5226.														
5227.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	- - -Total Wages Subject to Medicare (Box 5 of W-2): - - - Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - - Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
5228.														
5229.														
5230.														
5231.														
5232.														
5233.														
5234.														
5235.														
5236.														
5237.														
5238.														
5239.														
5240.														
5241.														
5242.														
5243.														
5244.														
5245.														
5246.														
5247.														
5248.														
5249.														
5250.														
5251.														
5252.														
5253.														
5254.														
5255.														
5256.														
5257.														
5258.														
5259.														
5260.														
5261.														
5262.														
5263.														
5264.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
5265.														
5266.														
5267.														
5268.														
5269.														
5270.														
5271.														
5272.														
5273.														
5274.														
5275.														
5276.														
5277.														
5278.														
5279.														
5280.														
5281.														
5282.														
5283.														
5284.														
5285.														
5286.														
5287.														
5288.														
5289.														
5290.														
5291.														
5292.														
5293.														
5294.														
5295.														
5296.														
5297.														
5298.														
5299.														
5300.														
5301.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
5302.														
5303.														
5304.														
5305.														
5306.														
5307.														
5308.														
5309.														
5310.														
5311.														
5312.														
5313.														
5314.														
5315.														
5316.														
5317.														
5318.														
5319.														
5320.														
5321.														
5322.														
5323.														
5324.														
5325.														
5326.														
5327.														
5328.														
5329.														
5330.														
5331.														
5332.														
5333.														
5334.														
5335.														
5336.														
5337.														
5338.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
5339.														
5340.														
5341.														
5342.														
5343.														
5344.														
5345.														
5346.														
5347.														
5348.														
5349.														
5350.														
5351.														
5352.														
5353.														
5354.														
5355.														
5356.														
5357.														
5358.														
5359.														
5360.														
5361.														
5362.														
5363.														
5364.														
5365.														
5366.														
5367.														
5368.														
5369.														
5370.														
5371.														
5372.														
5373.														
5374.														
5375.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	- - -Total Wages Subject to Medicare (Box 5 of W-2): - - - Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - - Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
5376.														
5377.														
5378.														
5379.														
5380.														
5381.														
5382.														
5383.														
5384.														
5385.														
5386.														
5387.														
5388.														
5389.														
5390.														
5391.														
5392.														
5393.														
5394.														
5395.														
5396.														
5397.														
5398.														
5399.														
5400.														
5401.														
5402.														
5403.														
5404.														
5405.														
5406.														
5407.														
5408.														
5409.														
5410.														
5411.														
5412.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
5413.														
5414.														
5415.														
5416.														
5417.														
5418.														
5419.														
5420.														
5421.														
5422.														
5423.														
5424.														
5425.														
5426.														
5427.														
5428.														
5429.														
5430.														
5431.														
5432.														
5433.														
5434.														
5435.														
5436.														
5437.														
5438.														
5439.														
5440.														
5441.														
5442.														
5443.														
5444.														
5445.														
5446.														
5447.														
5448.														
5449.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
5450.														
5451.														
5452.														
5453.														
5454.														
5455.														
5456.														
5457.														
5458.														
5459.														
5460.														
5461.														
5462.														
5463.														
5464.														
5465.														
5466.														
5467.														
5468.														
5469.														
5470.														
5471.														
5472.														
5473.														
5474.														
5475.														
5476.														
5477.														
5478.														
5479.														
5480.														
5481.														
5482.														
5483.														
5484.														
5485.														
5486.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
5487.														
5488.														
5489.														
5490.														
5491.														
5492.														
5493.														
5494.														
5495.														
5496.														
5497.														
5498.														
5499.														
5500.														
5501.														
5502.														
5503.														
5504.														
5505.														
5506.														
5507.														
5508.														
5509.														
5510.														
5511.														
5512.														
5513.														
5514.														
5515.														
5516.														
5517.														
5518.														
5519.														
5520.														
5521.														
5522.														
5523.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
5524.														
5525.														
5526.														
5527.														
5528.														
5529.														
5530.														
5531.														
5532.														
5533.														
5534.														
5535.														
5536.														
5537.														
5538.														
5539.														
5540.														
5541.														
5542.														
5543.														
5544.														
5545.														
5546.														
5547.														
5548.														
5549.														
5550.														
5551.														
5552.														
5553.														
5554.														
5555.														
5556.														
5557.														
5558.														
5559.														
5560.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
5561.														
5562.														
5563.														
5564.														
5565.														
5566.														
5567.														
5568.														
5569.														
5570.														
5571.														
5572.														
5573.														
5574.														
5575.														
5576.														
5577.														
5578.														
5579.														
5580.														
5581.														
5582.														
5583.														
5584.														
5585.														
5586.														
5587.														
5588.														
5589.														
5590.														
5591.														
5592.														
5593.														
5594.														
5595.														
5596.														
5597.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
5598.														
5599.														
5600.														
5601.														
5602.														
5603.														
5604.														
5605.														
5606.														
5607.														
5608.														
5609.														
5610.														
5611.														
5612.														
5613.														
5614.														
5615.														
5616.														
5617.														
5618.														
5619.														
5620.														
5621.														
5622.														
5623.														
5624.														
5625.														
5626.														
5627.														
5628.														
5629.														
5630.														
5631.														
5632.														
5633.														
5634.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
5635.														
5636.														
5637.														
5638.														
5639.														
5640.														
5641.														
5642.														
5643.														
5644.														
5645.														
5646.														
5647.														
5648.														
5649.														
5650.														
5651.														
5652.														
5653.														
5654.														
5655.														
5656.														
5657.														
5658.														
5659.														
5660.														
5661.														
5662.														
5663.														
5664.														
5665.														
5666.														
5667.														
5668.														
5669.														
5670.														
5671.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	- - -Total Wages Subject to Medicare (Box 5 of W-2): - - - Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - - Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
5672.														
5673.														
5674.														
5675.														
5676.														
5677.														
5678.														
5679.														
5680.														
5681.														
5682.														
5683.														
5684.														
5685.														
5686.														
5687.														
5688.														
5689.														
5690.														
5691.														
5692.														
5693.														
5694.														
5695.														
5696.														
5697.														
5698.														
5699.														
5700.														
5701.														
5702.														
5703.														
5704.														
5705.														
5706.														
5707.														
5708.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
5709.														
5710.														
5711.														
5712.														
5713.														
5714.														
5715.														
5716.														
5717.														
5718.														
5719.														
5720.														
5721.														
5722.														
5723.														
5724.														
5725.														
5726.														
5727.														
5728.														
5729.														
5730.														
5731.														
5732.														
5733.														
5734.														
5735.														
5736.														
5737.														
5738.														
5739.														
5740.														
5741.														
5742.														
5743.														
5744.														
5745.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
5746.														
5747.														
5748.														
5749.														
5750.														
5751.														
5752.														
5753.														
5754.														
5755.														
5756.														
5757.														
5758.														
5759.														
5760.														
5761.														
5762.														
5763.														
5764.														
5765.														
5766.														
5767.														
5768.														
5769.														
5770.														
5771.														
5772.														
5773.														
5774.														
5775.														
5776.														
5777.														
5778.														
5779.														
5780.														
5781.														
5782.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	- - -Total Wages Subject to Medicare (Box 5 of W-2): - - - Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - - Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
5783.														
5784.														
5785.														
5786.														
5787.														
5788.														
5789.														
5790.														
5791.														
5792.														
5793.														
5794.														
5795.														
5796.														
5797.														
5798.														
5799.														
5800.														
5801.														
5802.														
5803.														
5804.														
5805.														
5806.														
5807.														
5808.														
5809.														
5810.														
5811.														
5812.														
5813.														
5814.														
5815.														
5816.														
5817.														
5818.														
5819.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
5820.														
5821.														
5822.														
5823.														
5824.														
5825.														
5826.														
5827.														
5828.														
5829.														
5830.														
5831.														
5832.														
5833.														
5834.														
5835.														
5836.														
5837.														
5838.														
5839.														
5840.														
5841.														
5842.														
5843.														
5844.														
5845.														
5846.														
5847.														
5848.														
5849.														
5850.														
5851.														
5852.														
5853.														
5854.														
5855.														
5856.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
5857.														
5858.														
5859.														
5860.														
5861.														
5862.														
5863.														
5864.														
5865.														
5866.														
5867.														
5868.														
5869.														
5870.														
5871.														
5872.														
5873.														
5874.														
5875.														
5876.														
5877.														
5878.														
5879.														
5880.														
5881.														
5882.														
5883.														
5884.														
5885.														
5886.														
5887.														
5888.														
5889.														
5890.														
5891.														
5892.														
5893.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
5894.														
5895.														
5896.														
5897.														
5898.														
5899.														
5900.														
5901.														
5902.														
5903.														
5904.														
5905.														
5906.														
5907.														
5908.														
5909.														
5910.														
5911.														
5912.														
5913.														
5914.														
5915.														
5916.														
5917.														
5918.														
5919.														
5920.														
5921.														
5922.														
5923.														
5924.														
5925.														
5926.														
5927.														
5928.														
5929.														
5930.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
5931.														
5932.														
5933.														
5934.														
5935.														
5936.														
5937.														
5938.														
5939.														
5940.														
5941.														
5942.														
5943.														
5944.														
5945.														
5946.														
5947.														
5948.														
5949.														
5950.														
5951.														
5952.														
5953.														
5954.														
5955.														
5956.														
5957.														
5958.														
5959.														
5960.														
5961.														
5962.														
5963.														
5964.														
5965.														
5966.														
5967.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
5968.														
5969.														
5970.														
5971.														
5972.														
5973.														
5974.														
5975.														
5976.														
5977.														
5978.														
5979.														
5980.														
5981.														
5982.														
5983.														
5984.														
5985.														
5986.														
5987.														
5988.														
5989.														
5990.														
5991.														
5992.														
5993.														
5994.														
5995.														
5996.														
5997.														
5998.														
5999.														
6000.														
6001.														
6002.														
6003.														
6004.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
6005.														
6006.														
6007.														
6008.														
6009.														
6010.														
6011.														
6012.														
6013.														
6014.														
6015.														
6016.														
6017.														
6018.														
6019.														
6020.														
6021.														
6022.														
6023.														
6024.														
6025.														
6026.														
6027.														
6028.														
6029.														
6030.														
6031.														
6032.														
6033.														
6034.														
6035.														
6036.														
6037.														
6038.														
6039.														
6040.														
6041.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
6042.														
6043.														
6044.														
6045.														
6046.														
6047.														
6048.														
6049.														
6050.														
6051.														
6052.														
6053.														
6054.														
6055.														
6056.														
6057.														
6058.														
6059.														
6060.														
6061.														
6062.														
6063.														
6064.														
6065.														
6066.														
6067.														
6068.														
6069.														
6070.														
6071.														
6072.														
6073.														
6074.														
6075.														
6076.														
6077.														
6078.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
6079.														
6080.														
6081.														
6082.														
6083.														
6084.														
6085.														
6086.														
6087.														
6088.														
6089.														
6090.														
6091.														
6092.														
6093.														
6094.														
6095.														
6096.														
6097.														
6098.														
6099.														
6100.														
6101.														
6102.														
6103.														
6104.														
6105.														
6106.														
6107.														
6108.														
6109.														
6110.														
6111.														
6112.														
6113.														
6114.														
6115.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
6116.														
6117.														
6118.														
6119.														
6120.														
6121.														
6122.														
6123.														
6124.														
6125.														
6126.														
6127.														
6128.														
6129.														
6130.														
6131.														
6132.														
6133.														
6134.														
6135.														
6136.														
6137.														
6138.														
6139.														
6140.														
6141.														
6142.														
6143.														
6144.														
6145.														
6146.														
6147.														
6148.														
6149.														
6150.														
6151.														
6152.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	- - -Total Wages Subject to Medicare (Box 5 of W-2): - - - Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - - Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
6153.														
6154.														
6155.														
6156.														
6157.														
6158.														
6159.														
6160.														
6161.														
6162.														
6163.														
6164.														
6165.														
6166.														
6167.														
6168.														
6169.														
6170.														
6171.														
6172.														
6173.														
6174.														
6175.														
6176.														
6177.														
6178.														
6179.														
6180.														
6181.														
6182.														
6183.														
6184.														
6185.														
6186.														
6187.														
6188.														
6189.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
6190.														
6191.														
6192.														
6193.														
6194.														
6195.														
6196.														
6197.														
6198.														
6199.														
6200.														
6201.														
6202.														
6203.														
6204.														
6205.														
6206.														
6207.														
6208.														
6209.														
6210.														
6211.														
6212.														
6213.														
6214.														
6215.														
6216.														
6217.														
6218.														
6219.														
6220.														
6221.														
6222.														
6223.														
6224.														
6225.														
6226.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
6227.														
6228.														
6229.														
6230.														
6231.														
6232.														
6233.														
6234.														
6235.														
6236.														
6237.														
6238.														
6239.														
6240.														
6241.														
6242.														
6243.														
6244.														
6245.														
6246.														
6247.														
6248.														
6249.														
6250.														
6251.														
6252.														
6253.														
6254.														
6255.														
6256.														
6257.														
6258.														
6259.														
6260.														
6261.														
6262.														
6263.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
6264.														
6265.														
6266.														
6267.														
6268.														
6269.														
6270.														
6271.														
6272.														
6273.														
6274.														
6275.														
6276.														
6277.														
6278.														
6279.														
6280.														
6281.														
6282.														
6283.														
6284.														
6285.														
6286.														
6287.														
6288.														
6289.														
6290.														
6291.														
6292.														
6293.														
6294.														
6295.														
6296.														
6297.														
6298.														
6299.														
6300.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
6301.														
6302.														
6303.														
6304.														
6305.														
6306.														
6307.														
6308.														
6309.														
6310.														
6311.														
6312.														
6313.														
6314.														
6315.														
6316.														
6317.														
6318.														
6319.														
6320.														
6321.														
6322.														
6323.														
6324.														
6325.														
6326.														
6327.														
6328.														
6329.														
6330.														
6331.														
6332.														
6333.														
6334.														
6335.														
6336.														
6337.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
6338.														
6339.														
6340.														
6341.														
6342.														
6343.														
6344.														
6345.														
6346.														
6347.														
6348.														
6349.														
6350.														
6351.														
6352.														
6353.														
6354.														
6355.														
6356.														
6357.														
6358.														
6359.														
6360.														
6361.														
6362.														
6363.														
6364.														
6365.														
6366.														
6367.														
6368.														
6369.														
6370.														
6371.														
6372.														
6373.														
6374.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
6375.														
6376.														
6377.														
6378.														
6379.														
6380.														
6381.														
6382.														
6383.														
6384.														
6385.														
6386.														
6387.														
6388.														
6389.														
6390.														
6391.														
6392.														
6393.														
6394.														
6395.														
6396.														
6397.														
6398.														
6399.														
6400.														
6401.														
6402.														
6403.														
6404.														
6405.														
6406.														
6407.														
6408.														
6409.														
6410.														
6411.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
6412.														
6413.														
6414.														
6415.														
6416.														
6417.														
6418.														
6419.														
6420.														
6421.														
6422.														
6423.														
6424.														
6425.														
6426.														
6427.														
6428.														
6429.														
6430.														
6431.														
6432.														
6433.														
6434.														
6435.														
6436.														
6437.														
6438.														
6439.														
6440.														
6441.														
6442.														
6443.														
6444.														
6445.														
6446.														
6447.														
6448.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
6449.														
6450.														
6451.														
6452.														
6453.														
6454.														
6455.														
6456.														
6457.														
6458.														
6459.														
6460.														
6461.														
6462.														
6463.														
6464.														
6465.														
6466.														
6467.														
6468.														
6469.														
6470.														
6471.														
6472.														
6473.														
6474.														
6475.														
6476.														
6477.														
6478.														
6479.														
6480.														
6481.														
6482.														
6483.														
6484.														
6485.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
6486.														
6487.														
6488.														
6489.														
6490.														
6491.														
6492.														
6493.														
6494.														
6495.														
6496.														
6497.														
6498.														
6499.														
6500.														
6501.														
6502.														
6503.														
6504.														
6505.														
6506.														
6507.														
6508.														
6509.														
6510.														
6511.														
6512.														
6513.														
6514.														
6515.														
6516.														
6517.														
6518.														
6519.														
6520.														
6521.														
6522.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
6523.														
6524.														
6525.														
6526.														
6527.														
6528.														
6529.														
6530.														
6531.														
6532.														
6533.														
6534.														
6535.														
6536.														
6537.														
6538.														
6539.														
6540.														
6541.														
6542.														
6543.														
6544.														
6545.														
6546.														
6547.														
6548.														
6549.														
6550.														
6551.														
6552.														
6553.														
6554.														
6555.														
6556.														
6557.														
6558.														
6559.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
6560.														
6561.														
6562.														
6563.														
6564.														
6565.														
6566.														
6567.														
6568.														
6569.														
6570.														
6571.														
6572.														
6573.														
6574.														
6575.														
6576.														
6577.														
6578.														
6579.														
6580.														
6581.														
6582.														
6583.														
6584.														
6585.														
6586.														
6587.														
6588.														
6589.														
6590.														
6591.														
6592.														
6593.														
6594.														
6595.														
6596.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	- - -Total Wages Subject to Medicare (Box 5 of W-2): - - - Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - - Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
6597.														
6598.														
6599.														
6600.														
6601.														
6602.														
6603.														
6604.														
6605.														
6606.														
6607.														
6608.														
6609.														
6610.														
6611.														
6612.														
6613.														
6614.														
6615.														
6616.														
6617.														
6618.														
6619.														
6620.														
6621.														
6622.														
6623.														
6624.														
6625.														
6626.														
6627.														
6628.														
6629.														
6630.														
6631.														
6632.														
6633.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
6634.														
6635.														
6636.														
6637.														
6638.														
6639.														
6640.														
6641.														
6642.														
6643.														
6644.														
6645.														
6646.														
6647.														
6648.														
6649.														
6650.														
6651.														
6652.														
6653.														
6654.														
6655.														
6656.														
6657.														
6658.														
6659.														
6660.														
6661.														
6662.														
6663.														
6664.														
6665.														
6666.														
6667.														
6668.														
6669.														
6670.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
6671.														
6672.														
6673.														
6674.														
6675.														
6676.														
6677.														
6678.														
6679.														
6680.														
6681.														
6682.														
6683.														
6684.														
6685.														
6686.														
6687.														
6688.														
6689.														
6690.														
6691.														
6692.														
6693.														
6694.														
6695.														
6696.														
6697.														
6698.														
6699.														
6700.														
6701.														
6702.														
6703.														
6704.														
6705.														
6706.														
6707.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
6708.														
6709.														
6710.														
6711.														
6712.														
6713.														
6714.														
6715.														
6716.														
6717.														
6718.														
6719.														
6720.														
6721.														
6722.														
6723.														
6724.														
6725.														
6726.														
6727.														
6728.														
6729.														
6730.														
6731.														
6732.														
6733.														
6734.														
6735.														
6736.														
6737.														
6738.														
6739.														
6740.														
6741.														
6742.														
6743.														
6744.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
6745.														
6746.														
6747.														
6748.														
6749.														
6750.														
6751.														
6752.														
6753.														
6754.														
6755.														
6756.														
6757.														
6758.														
6759.														
6760.														
6761.														
6762.														
6763.														
6764.														
6765.														
6766.														
6767.														
6768.														
6769.														
6770.														
6771.														
6772.														
6773.														
6774.														
6775.														
6776.														
6777.														
6778.														
6779.														
6780.														
6781.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	- - -Total Wages Subject to Medicare (Box 5 of W-2): - - - Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - - Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
6782.														
6783.														
6784.														
6785.														
6786.														
6787.														
6788.														
6789.														
6790.														
6791.														
6792.														
6793.														
6794.														
6795.														
6796.														
6797.														
6798.														
6799.														
6800.														
6801.														
6802.														
6803.														
6804.														
6805.														
6806.														
6807.														
6808.														
6809.														
6810.														
6811.														
6812.														
6813.														
6814.														
6815.														
6816.														
6817.														
6818.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
6819.														
6820.														
6821.														
6822.														
6823.														
6824.														
6825.														
6826.														
6827.														
6828.														
6829.														
6830.														
6831.														
6832.														
6833.														
6834.														
6835.														
6836.														
6837.														
6838.														
6839.														
6840.														
6841.														
6842.														
6843.														
6844.														
6845.														
6846.														
6847.														
6848.														
6849.														
6850.														
6851.														
6852.														
6853.														
6854.														
6855.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
6856.														
6857.														
6858.														
6859.														
6860.														
6861.														
6862.														
6863.														
6864.														
6865.														
6866.														
6867.														
6868.														
6869.														
6870.														
6871.														
6872.														
6873.														
6874.														
6875.														
6876.														
6877.														
6878.														
6879.														
6880.														
6881.														
6882.														
6883.														
6884.														
6885.														
6886.														
6887.														
6888.														
6889.														
6890.														
6891.														
6892.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
6893.														
6894.														
6895.														
6896.														
6897.														
6898.														
6899.														
6900.														
6901.														
6902.														
6903.														
6904.														
6905.														
6906.														
6907.														
6908.														
6909.														
6910.														
6911.														
6912.														
6913.														
6914.														
6915.														
6916.														
6917.														
6918.														
6919.														
6920.														
6921.														
6922.														
6923.														
6924.														
6925.														
6926.														
6927.														
6928.														
6929.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
6930.														
6931.														
6932.														
6933.														
6934.														
6935.														
6936.														
6937.														
6938.														
6939.														
6940.														
6941.														
6942.														
6943.														
6944.														
6945.														
6946.														
6947.														
6948.														
6949.														
6950.														
6951.														
6952.														
6953.														
6954.														
6955.														
6956.														
6957.														
6958.														
6959.														
6960.														
6961.														
6962.														
6963.														
6964.														
6965.														
6966.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	- - -Total Wages Subject to Medicare (Box 5 of W-2): - - - Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - - Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
6967.														
6968.														
6969.														
6970.														
6971.														
6972.														
6973.														
6974.														
6975.														
6976.														
6977.														
6978.														
6979.														
6980.														
6981.														
6982.														
6983.														
6984.														
6985.														
6986.														
6987.														
6988.														
6989.														
6990.														
6991.														
6992.														
6993.														
6994.														
6995.														
6996.														
6997.														
6998.														
6999.														
7000.														
7001.														
7002.														
7003.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
7004.														
7005.														
7006.														
7007.														
7008.														
7009.														
7010.														
7011.														
7012.														
7013.														
7014.														
7015.														
7016.														
7017.														
7018.														
7019.														
7020.														
7021.														
7022.														
7023.														
7024.														
7025.														
7026.														
7027.														
7028.														
7029.														
7030.														
7031.														
7032.														
7033.														
7034.														
7035.														
7036.														
7037.														
7038.														
7039.														
7040.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
7041.														
7042.														
7043.														
7044.														
7045.														
7046.														
7047.														
7048.														
7049.														
7050.														
7051.														
7052.														
7053.														
7054.														
7055.														
7056.														
7057.														
7058.														
7059.														
7060.														
7061.														
7062.														
7063.														
7064.														
7065.														
7066.														
7067.														
7068.														
7069.														
7070.														
7071.														
7072.														
7073.														
7074.														
7075.														
7076.														
7077.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
7078.														
7079.														
7080.														
7081.														
7082.														
7083.														
7084.														
7085.														
7086.														
7087.														
7088.														
7089.														
7090.														
7091.														
7092.														
7093.														
7094.														
7095.														
7096.														
7097.														
7098.														
7099.														
7100.														
7101.														
7102.														
7103.														
7104.														
7105.														
7106.														
7107.														
7108.														
7109.														
7110.														
7111.														
7112.														
7113.														
7114.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
7115.														
7116.														
7117.														
7118.														
7119.														
7120.														
7121.														
7122.														
7123.														
7124.														
7125.														
7126.														
7127.														
7128.														
7129.														
7130.														
7131.														
7132.														
7133.														
7134.														
7135.														
7136.														
7137.														
7138.														
7139.														
7140.														
7141.														
7142.														
7143.														
7144.														
7145.														
7146.														
7147.														
7148.														
7149.														
7150.														
7151.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
7152.														
7153.														
7154.														
7155.														
7156.														
7157.														
7158.														
7159.														
7160.														
7161.														
7162.														
7163.														
7164.														
7165.														
7166.														
7167.														
7168.														
7169.														
7170.														
7171.														
7172.														
7173.														
7174.														
7175.														
7176.														
7177.														
7178.														
7179.														
7180.														
7181.														
7182.														
7183.														
7184.														
7185.														
7186.														
7187.														
7188.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
7189.														
7190.														
7191.														
7192.														
7193.														
7194.														
7195.														
7196.														
7197.														
7198.														
7199.														
7200.														
7201.														
7202.														
7203.														
7204.														
7205.														
7206.														
7207.														
7208.														
7209.														
7210.														
7211.														
7212.														
7213.														
7214.														
7215.														
7216.														
7217.														
7218.														
7219.														
7220.														
7221.														
7222.														
7223.														
7224.														
7225.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
7226.														
7227.														
7228.														
7229.														
7230.														
7231.														
7232.														
7233.														
7234.														
7235.														
7236.														
7237.														
7238.														
7239.														
7240.														
7241.														
7242.														
7243.														
7244.														
7245.														
7246.														
7247.														
7248.														
7249.														
7250.														
7251.														
7252.														
7253.														
7254.														
7255.														
7256.														
7257.														
7258.														
7259.														
7260.														
7261.														
7262.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
7263.														
7264.														
7265.														
7266.														
7267.														
7268.														
7269.														
7270.														
7271.														
7272.														
7273.														
7274.														
7275.														
7276.														
7277.														
7278.														
7279.														
7280.														
7281.														
7282.														
7283.														
7284.														
7285.														
7286.														
7287.														
7288.														
7289.														
7290.														
7291.														
7292.														
7293.														
7294.														
7295.														
7296.														
7297.														
7298.														
7299.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
7300.														
7301.														
7302.														
7303.														
7304.														
7305.														
7306.														
7307.														
7308.														
7309.														
7310.														
7311.														
7312.														
7313.														
7314.														
7315.														
7316.														
7317.														
7318.														
7319.														
7320.														
7321.														
7322.														
7323.														
7324.														
7325.														
7326.														
7327.														
7328.														
7329.														
7330.														
7331.														
7332.														
7333.														
7334.														
7335.														
7336.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
7337.														
7338.														
7339.														
7340.														
7341.														
7342.														
7343.														
7344.														
7345.														
7346.														
7347.														
7348.														
7349.														
7350.														
7351.														
7352.														
7353.														
7354.														
7355.														
7356.														
7357.														
7358.														
7359.														
7360.														
7361.														
7362.														
7363.														
7364.														
7365.														
7366.														
7367.														
7368.														
7369.														
7370.														
7371.														
7372.														
7373.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
7374.														
7375.														
7376.														
7377.														
7378.														
7379.														
7380.														
7381.														
7382.														
7383.														
7384.														
7385.														
7386.														
7387.														
7388.														
7389.														
7390.														
7391.														
7392.														
7393.														
7394.														
7395.														
7396.														
7397.														
7398.														
7399.														
7400.														
7401.														
7402.														
7403.														
7404.														
7405.														
7406.														
7407.														
7408.														
7409.														
7410.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
7411.														
7412.														
7413.														
7414.														
7415.														
7416.														
7417.														
7418.														
7419.														
7420.														
7421.														
7422.														
7423.														
7424.														
7425.														
7426.														
7427.														
7428.														
7429.														
7430.														
7431.														
7432.														
7433.														
7434.														
7435.														
7436.														
7437.														
7438.														
7439.														
7440.														
7441.														
7442.														
7443.														
7444.														
7445.														
7446.														
7447.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
7448.														
7449.														
7450.														
7451.														
7452.														
7453.														
7454.														
7455.														
7456.														
7457.														
7458.														
7459.														
7460.														
7461.														
7462.														
7463.														
7464.														
7465.														
7466.														
7467.														
7468.														
7469.														
7470.														
7471.														
7472.														
7473.														
7474.														
7475.														
7476.														
7477.														
7478.														
7479.														
7480.														
7481.														
7482.														
7483.														
7484.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
7485.														
7486.														
7487.														
7488.														
7489.														
7490.														
7491.														
7492.														
7493.														
7494.														
7495.														
7496.														
7497.														
7498.														
7499.														
7500.														
7501.														
7502.														
7503.														
7504.														
7505.														
7506.														
7507.														
7508.														
7509.														
7510.														
7511.														
7512.														
7513.														
7514.														
7515.														
7516.														
7517.														
7518.														
7519.														
7520.														
7521.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
7522.														
7523.														
7524.														
7525.														
7526.														
7527.														
7528.														
7529.														
7530.														
7531.														
7532.														
7533.														
7534.														
7535.														
7536.														
7537.														
7538.														
7539.														
7540.														
7541.														
7542.														
7543.														
7544.														
7545.														
7546.														
7547.														
7548.														
7549.														
7550.														
7551.														
7552.														
7553.														
7554.														
7555.														
7556.														
7557.														
7558.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	- - -Total Wages Subject to Medicare (Box 5 of W-2): - - - Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - - Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
7559.														
7560.														
7561.														
7562.														
7563.														
7564.														
7565.														
7566.														
7567.														
7568.														
7569.														
7570.														
7571.														
7572.														
7573.														
7574.														
7575.														
7576.														
7577.														
7578.														
7579.														
7580.														
7581.														
7582.														
7583.														
7584.														
7585.														
7586.														
7587.														
7588.														
7589.														
7590.														
7591.														
7592.														
7593.														
7594.														
7595.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	- - -Total Wages Subject to Medicare (Box 5 of W-2): - - - Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - - Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
7596.														
7597.														
7598.														
7599.														
7600.														
7601.														
7602.														
7603.														
7604.														
7605.														
7606.														
7607.														
7608.														
7609.														
7610.														
7611.														
7612.														
7613.														
7614.														
7615.														
7616.														
7617.														
7618.														
7619.														
7620.														
7621.														
7622.														
7623.														
7624.														
7625.														
7626.														
7627.														
7628.														
7629.														
7630.														
7631.														
7632.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	- - -Total Wages Subject to Medicare (Box 5 of W-2): - - - Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - - Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
7633.														
7634.														
7635.														
7636.														
7637.														
7638.														
7639.														
7640.														
7641.														
7642.														
7643.														
7644.														
7645.														
7646.														
7647.														
7648.														
7649.														
7650.														
7651.														
7652.														
7653.														
7654.														
7655.														
7656.														
7657.														
7658.														
7659.														
7660.														
7661.														
7662.														
7663.														
7664.														
7665.														
7666.														
7667.														
7668.														
7669.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
7670.														
7671.														
7672.														
7673.														
7674.														
7675.														
7676.														
7677.														
7678.														
7679.														
7680.														
7681.														
7682.														
7683.														
7684.														
7685.														
7686.														
7687.														
7688.														
7689.														
7690.														
7691.														
7692.														
7693.														
7694.														
7695.														
7696.														
7697.														
7698.														
7699.														
7700.														
7701.														
7702.														
7703.														
7704.														
7705.														
7706.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	- - -Total Wages Subject to Medicare (Box 5 of W-2): - - - Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - - Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
7707.														
7708.														
7709.														
7710.														
7711.														
7712.														
7713.														
7714.														
7715.														
7716.														
7717.														
7718.														
7719.														
7720.														
7721.														
7722.														
7723.														
7724.														
7725.														
7726.														
7727.														
7728.														
7729.														
7730.														
7731.														
7732.														
7733.														
7734.														
7735.														
7736.														
7737.														
7738.														
7739.														
7740.														
7741.														
7742.														
7743.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	- - -Total Wages Subject to Medicare (Box 5 of W-2): - - - Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - - Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
7744.														
7745.														
7746.														
7747.														
7748.														
7749.														
7750.														
7751.														
7752.														
7753.														
7754.														
7755.														
7756.														
7757.														
7758.														
7759.														
7760.														
7761.														
7762.														
7763.														
7764.														
7765.														
7766.														
7767.														
7768.														
7769.														
7770.														
7771.														
7772.														
7773.														
7774.														
7775.														
7776.														
7777.														
7778.														
7779.														
7780.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
7781.														
7782.														
7783.														
7784.														
7785.														
7786.														
7787.														
7788.														
7789.														
7790.														
7791.														
7792.														
7793.														
7794.														
7795.														
7796.														
7797.														
7798.														
7799.														
7800.														
7801.														
7802.														
7803.														
7804.														
7805.														
7806.														
7807.														
7808.														
7809.														
7810.														
7811.														
7812.														
7813.														
7814.														
7815.														
7816.														
7817.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
7818.														
7819.														
7820.														
7821.														
7822.														
7823.														
7824.														
7825.														
7826.														
7827.														
7828.														
7829.														
7830.														
7831.														
7832.														
7833.														
7834.														
7835.														
7836.														
7837.														
7838.														
7839.														
7840.														
7841.														
7842.														
7843.														
7844.														
7845.														
7846.														
7847.														
7848.														
7849.														
7850.														
7851.														
7852.														
7853.														
7854.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
7855.														
7856.														
7857.														
7858.														
7859.														
7860.														
7861.														
7862.														
7863.														
7864.														
7865.														
7866.														
7867.														
7868.														
7869.														
7870.														
7871.														
7872.														
7873.														
7874.														
7875.														
7876.														
7877.														
7878.														
7879.														
7880.														
7881.														
7882.														
7883.														
7884.														
7885.														
7886.														
7887.														
7888.														
7889.														
7890.														
7891.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	- - -Total Wages Subject to Medicare (Box 5 of W-2): - - - Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - - Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
7892.														
7893.														
7894.														
7895.														
7896.														
7897.														
7898.														
7899.														
7900.														
7901.														
7902.														
7903.														
7904.														
7905.														
7906.														
7907.														
7908.														
7909.														
7910.														
7911.														
7912.														
7913.														
7914.														
7915.														
7916.														
7917.														
7918.														
7919.														
7920.														
7921.														
7922.														
7923.														
7924.														
7925.														
7926.														
7927.														
7928.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
7929.														
7930.														
7931.														
7932.														
7933.														
7934.														
7935.														
7936.														
7937.														
7938.														
7939.														
7940.														
7941.														
7942.														
7943.														
7944.														
7945.														
7946.														
7947.														
7948.														
7949.														
7950.														
7951.														
7952.														
7953.														
7954.														
7955.														
7956.														
7957.														
7958.														
7959.														
7960.														
7961.														
7962.														
7963.														
7964.														
7965.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
7966.														
7967.														
7968.														
7969.														
7970.														
7971.														
7972.														
7973.														
7974.														
7975.														
7976.														
7977.														
7978.														
7979.														
7980.														
7981.														
7982.														
7983.														
7984.														
7985.														
7986.														
7987.														
7988.														
7989.														
7990.														
7991.														
7992.														
7993.														
7994.														
7995.														
7996.														
7997.														
7998.														
7999.														
8000.														
8001.														
8002.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
8003.														
8004.														
8005.														
8006.														
8007.														
8008.														
8009.														
8010.														
8011.														
8012.														
8013.														
8014.														
8015.														
8016.														
8017.														
8018.														
8019.														
8020.														
8021.														
8022.														
8023.														
8024.														
8025.														
8026.														
8027.														
8028.														
8029.														
8030.														
8031.														
8032.														
8033.														
8034.														
8035.														
8036.														
8037.														
8038.														
8039.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
8040.														
8041.														
8042.														
8043.														
8044.														
8045.														
8046.														
8047.														
8048.														
8049.														
8050.														
8051.														
8052.														
8053.														
8054.														
8055.														
8056.														
8057.														
8058.														
8059.														
8060.														
8061.														
8062.														
8063.														
8064.														
8065.														
8066.														
8067.														
8068.														
8069.														
8070.														
8071.														
8072.														
8073.														
8074.														
8075.														
8076.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
8077.														
8078.														
8079.														
8080.														
8081.														
8082.														
8083.														
8084.														
8085.														
8086.														
8087.														
8088.														
8089.														
8090.														
8091.														
8092.														
8093.														
8094.														
8095.														
8096.														
8097.														
8098.														
8099.														
8100.														
8101.														
8102.														
8103.														
8104.														
8105.														
8106.														
8107.														
8108.														
8109.														
8110.														
8111.														
8112.														
8113.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
8114.														
8115.														
8116.														
8117.														
8118.														
8119.														
8120.														
8121.														
8122.														
8123.														
8124.														
8125.														
8126.														
8127.														
8128.														
8129.														
8130.														
8131.														
8132.														
8133.														
8134.														
8135.														
8136.														
8137.														
8138.														
8139.														
8140.														
8141.														
8142.														
8143.														
8144.														
8145.														
8146.														
8147.														
8148.														
8149.														
8150.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	- - -Total Wages Subject to Medicare (Box 5 of W-2): - - - Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - - Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
8151.														
8152.														
8153.														
8154.														
8155.														
8156.														
8157.														
8158.														
8159.														
8160.														
8161.														
8162.														
8163.														
8164.														
8165.														
8166.														
8167.														
8168.														
8169.														
8170.														
8171.														
8172.														
8173.														
8174.														
8175.														
8176.														
8177.														
8178.														
8179.														
8180.														
8181.														
8182.														
8183.														
8184.														
8185.														
8186.														
8187.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
8188.														
8189.														
8190.														
8191.														
8192.														
8193.														
8194.														
8195.														
8196.														
8197.														
8198.														
8199.														
8200.														
8201.														
8202.														
8203.														
8204.														
8205.														
8206.														
8207.														
8208.														
8209.														
8210.														
8211.														
8212.														
8213.														
8214.														
8215.														
8216.														
8217.														
8218.														
8219.														
8220.														
8221.														
8222.														
8223.														
8224.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
8225.														
8226.														
8227.														
8228.														
8229.														
8230.														
8231.														
8232.														
8233.														
8234.														
8235.														
8236.														
8237.														
8238.														
8239.														
8240.														
8241.														
8242.														
8243.														
8244.														
8245.														
8246.														
8247.														
8248.														
8249.														
8250.														
8251.														
8252.														
8253.														
8254.														
8255.														
8256.														
8257.														
8258.														
8259.														
8260.														
8261.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	- - -Total Wages Subject to Medicare (Box 5 of W-2): - - - Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - - Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
8262.														
8263.														
8264.														
8265.														
8266.														
8267.														
8268.														
8269.														
8270.														
8271.														
8272.														
8273.														
8274.														
8275.														
8276.														
8277.														
8278.														
8279.														
8280.														
8281.														
8282.														
8283.														
8284.														
8285.														
8286.														
8287.														
8288.														
8289.														
8290.														
8291.														
8292.														
8293.														
8294.														
8295.														
8296.														
8297.														
8298.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
8299.														
8300.														
8301.														
8302.														
8303.														
8304.														
8305.														
8306.														
8307.														
8308.														
8309.														
8310.														
8311.														
8312.														
8313.														
8314.														
8315.														
8316.														
8317.														
8318.														
8319.														
8320.														
8321.														
8322.														
8323.														
8324.														
8325.														
8326.														
8327.														
8328.														
8329.														
8330.														
8331.														
8332.														
8333.														
8334.														
8335.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
8336.														
8337.														
8338.														
8339.														
8340.														
8341.														
8342.														
8343.														
8344.														
8345.														
8346.														
8347.														
8348.														
8349.														
8350.														
8351.														
8352.														
8353.														
8354.														
8355.														
8356.														
8357.														
8358.														
8359.														
8360.														
8361.														
8362.														
8363.														
8364.														
8365.														
8366.														
8367.														
8368.														
8369.														
8370.														
8371.														
8372.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
8373.														
8374.														
8375.														
8376.														
8377.														
8378.														
8379.														
8380.														
8381.														
8382.														
8383.														
8384.														
8385.														
8386.														
8387.														
8388.														
8389.														
8390.														
8391.														
8392.														
8393.														
8394.														
8395.														
8396.														
8397.														
8398.														
8399.														
8400.														
8401.														
8402.														
8403.														
8404.														
8405.														
8406.														
8407.														
8408.														
8409.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
8410.														
8411.														
8412.														
8413.														
8414.														
8415.														
8416.														
8417.														
8418.														
8419.														
8420.														
8421.														
8422.														
8423.														
8424.														
8425.														
8426.														
8427.														
8428.														
8429.														
8430.														
8431.														
8432.														
8433.														
8434.														
8435.														
8436.														
8437.														
8438.														
8439.														
8440.														
8441.														
8442.														
8443.														
8444.														
8445.														
8446.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	- - -Total Wages Subject to Medicare (Box 5 of W-2): - - - Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - - Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
8447.														
8448.														
8449.														
8450.														
8451.														
8452.														
8453.														
8454.														
8455.														
8456.														
8457.														
8458.														
8459.														
8460.														
8461.														
8462.														
8463.														
8464.														
8465.														
8466.														
8467.														
8468.														
8469.														
8470.														
8471.														
8472.														
8473.														
8474.														
8475.														
8476.														
8477.														
8478.														
8479.														
8480.														
8481.														
8482.														
8483.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
8484.														
8485.														
8486.														
8487.														
8488.														
8489.														
8490.														
8491.														
8492.														
8493.														
8494.														
8495.														
8496.														
8497.														
8498.														
8499.														
8500.														
8501.														
8502.														
8503.														
8504.														
8505.														
8506.														
8507.														
8508.														
8509.														
8510.														
8511.														
8512.														
8513.														
8514.														
8515.														
8516.														
8517.														
8518.														
8519.														
8520.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	- - -Total Wages Subject to Medicare (Box 5 of W-2): - - - Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - - Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
8521.														
8522.														
8523.														
8524.														
8525.														
8526.														
8527.														
8528.														
8529.														
8530.														
8531.														
8532.														
8533.														
8534.														
8535.														
8536.														
8537.														
8538.														
8539.														
8540.														
8541.														
8542.														
8543.														
8544.														
8545.														
8546.														
8547.														
8548.														
8549.														
8550.														
8551.														
8552.														
8553.														
8554.														
8555.														
8556.														
8557.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
8558.														
8559.														
8560.														
8561.														
8562.														
8563.														
8564.														
8565.														
8566.														
8567.														
8568.														
8569.														
8570.														
8571.														
8572.														
8573.														
8574.														
8575.														
8576.														
8577.														
8578.														
8579.														
8580.														
8581.														
8582.														
8583.														
8584.														
8585.														
8586.														
8587.														
8588.														
8589.														
8590.														
8591.														
8592.														
8593.														
8594.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
8595.														
8596.														
8597.														
8598.														
8599.														
8600.														
8601.														
8602.														
8603.														
8604.														
8605.														
8606.														
8607.														
8608.														
8609.														
8610.														
8611.														
8612.														
8613.														
8614.														
8615.														
8616.														
8617.														
8618.														
8619.														
8620.														
8621.														
8622.														
8623.														
8624.														
8625.														
8626.														
8627.														
8628.														
8629.														
8630.														
8631.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
8632.														
8633.														
8634.														
8635.														
8636.														
8637.														
8638.														
8639.														
8640.														
8641.														
8642.														
8643.														
8644.														
8645.														
8646.														
8647.														
8648.														
8649.														
8650.														
8651.														
8652.														
8653.														
8654.														
8655.														
8656.														
8657.														
8658.														
8659.														
8660.														
8661.														
8662.														
8663.														
8664.														
8665.														
8666.														
8667.														
8668.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
8669.														
8670.														
8671.														
8672.														
8673.														
8674.														
8675.														
8676.														
8677.														
8678.														
8679.														
8680.														
8681.														
8682.														
8683.														
8684.														
8685.														
8686.														
8687.														
8688.														
8689.														
8690.														
8691.														
8692.														
8693.														
8694.														
8695.														
8696.														
8697.														
8698.														
8699.														
8700.														
8701.														
8702.														
8703.														
8704.														
8705.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
8706.														
8707.														
8708.														
8709.														
8710.														
8711.														
8712.														
8713.														
8714.														
8715.														
8716.														
8717.														
8718.														
8719.														
8720.														
8721.														
8722.														
8723.														
8724.														
8725.														
8726.														
8727.														
8728.														
8729.														
8730.														
8731.														
8732.														
8733.														
8734.														
8735.														
8736.														
8737.														
8738.														
8739.														
8740.														
8741.														
8742.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
8743.														
8744.														
8745.														
8746.														
8747.														
8748.														
8749.														
8750.														
8751.														
8752.														
8753.														
8754.														
8755.														
8756.														
8757.														
8758.														
8759.														
8760.														
8761.														
8762.														
8763.														
8764.														
8765.														
8766.														
8767.														
8768.														
8769.														
8770.														
8771.														
8772.														
8773.														
8774.														
8775.														
8776.														
8777.														
8778.														
8779.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
8780.														
8781.														
8782.														
8783.														
8784.														
8785.														
8786.														
8787.														
8788.														
8789.														
8790.														
8791.														
8792.														
8793.														
8794.														
8795.														
8796.														
8797.														
8798.														
8799.														
8800.														
8801.														
8802.														
8803.														
8804.														
8805.														
8806.														
8807.														
8808.														
8809.														
8810.														
8811.														
8812.														
8813.														
8814.														
8815.														
8816.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	- - -Total Wages Subject to Medicare (Box 5 of W-2): - - - Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - - Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
8817.														
8818.														
8819.														
8820.														
8821.														
8822.														
8823.														
8824.														
8825.														
8826.														
8827.														
8828.														
8829.														
8830.														
8831.														
8832.														
8833.														
8834.														
8835.														
8836.														
8837.														
8838.														
8839.														
8840.														
8841.														
8842.														
8843.														
8844.														
8845.														
8846.														
8847.														
8848.														
8849.														
8850.														
8851.														
8852.														
8853.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
8854.														
8855.														
8856.														
8857.														
8858.														
8859.														
8860.														
8861.														
8862.														
8863.														
8864.														
8865.														
8866.														
8867.														
8868.														
8869.														
8870.														
8871.														
8872.														
8873.														
8874.														
8875.														
8876.														
8877.														
8878.														
8879.														
8880.														
8881.														
8882.														
8883.														
8884.														
8885.														
8886.														
8887.														
8888.														
8889.														
8890.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	- - -Total Wages Subject to Medicare (Box 5 of W-2): - - - Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - - Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
8891.														
8892.														
8893.														
8894.														
8895.														
8896.														
8897.														
8898.														
8899.														
8900.														
8901.														
8902.														
8903.														
8904.														
8905.														
8906.														
8907.														
8908.														
8909.														
8910.														
8911.														
8912.														
8913.														
8914.														
8915.														
8916.														
8917.														
8918.														
8919.														
8920.														
8921.														
8922.														
8923.														
8924.														
8925.														
8926.														
8927.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
8928.														
8929.														
8930.														
8931.														
8932.														
8933.														
8934.														
8935.														
8936.														
8937.														
8938.														
8939.														
8940.														
8941.														
8942.														
8943.														
8944.														
8945.														
8946.														
8947.														
8948.														
8949.														
8950.														
8951.														
8952.														
8953.														
8954.														
8955.														
8956.														
8957.														
8958.														
8959.														
8960.														
8961.														
8962.														
8963.														
8964.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
8965.														
8966.														
8967.														
8968.														
8969.														
8970.														
8971.														
8972.														
8973.														
8974.														
8975.														
8976.														
8977.														
8978.														
8979.														
8980.														
8981.														
8982.														
8983.														
8984.														
8985.														
8986.														
8987.														
8988.														
8989.														
8990.														
8991.														
8992.														
8993.														
8994.														
8995.														
8996.														
8997.														
8998.														
8999.														
9000.														
9001.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
9002.														
9003.														
9004.														
9005.														
9006.														
9007.														
9008.														
9009.														
9010.														
9011.														
9012.														
9013.														
9014.														
9015.														
9016.														
9017.														
9018.														
9019.														
9020.														
9021.														
9022.														
9023.														
9024.														
9025.														
9026.														
9027.														
9028.														
9029.														
9030.														
9031.														
9032.														
9033.														
9034.														
9035.														
9036.														
9037.														
9038.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
9039.														
9040.														
9041.														
9042.														
9043.														
9044.														
9045.														
9046.														
9047.														
9048.														
9049.														
9050.														
9051.														
9052.														
9053.														
9054.														
9055.														
9056.														
9057.														
9058.														
9059.														
9060.														
9061.														
9062.														
9063.														
9064.														
9065.														
9066.														
9067.														
9068.														
9069.														
9070.														
9071.														
9072.														
9073.														
9074.														
9075.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
9076.														
9077.														
9078.														
9079.														
9080.														
9081.														
9082.														
9083.														
9084.														
9085.														
9086.														
9087.														
9088.														
9089.														
9090.														
9091.														
9092.														
9093.														
9094.														
9095.														
9096.														
9097.														
9098.														
9099.														
9100.														
9101.														
9102.														
9103.														
9104.														
9105.														
9106.														
9107.														
9108.														
9109.														
9110.														
9111.														
9112.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
9113.														
9114.														
9115.														
9116.														
9117.														
9118.														
9119.														
9120.														
9121.														
9122.														
9123.														
9124.														
9125.														
9126.														
9127.														
9128.														
9129.														
9130.														
9131.														
9132.														
9133.														
9134.														
9135.														
9136.														
9137.														
9138.														
9139.														
9140.														
9141.														
9142.														
9143.														
9144.														
9145.														
9146.														
9147.														
9148.														
9149.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
9150.														
9151.														
9152.														
9153.														
9154.														
9155.														
9156.														
9157.														
9158.														
9159.														
9160.														
9161.														
9162.														
9163.														
9164.														
9165.														
9166.														
9167.														
9168.														
9169.														
9170.														
9171.														
9172.														
9173.														
9174.														
9175.														
9176.														
9177.														
9178.														
9179.														
9180.														
9181.														
9182.														
9183.														
9184.														
9185.														
9186.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
9187.														
9188.														
9189.														
9190.														
9191.														
9192.														
9193.														
9194.														
9195.														
9196.														
9197.														
9198.														
9199.														
9200.														
9201.														
9202.														
9203.														
9204.														
9205.														
9206.														
9207.														
9208.														
9209.														
9210.														
9211.														
9212.														
9213.														
9214.														
9215.														
9216.														
9217.														
9218.														
9219.														
9220.														
9221.														
9222.														
9223.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
9224.														
9225.														
9226.														
9227.														
9228.														
9229.														
9230.														
9231.														
9232.														
9233.														
9234.														
9235.														
9236.														
9237.														
9238.														
9239.														
9240.														
9241.														
9242.														
9243.														
9244.														
9245.														
9246.														
9247.														
9248.														
9249.														
9250.														
9251.														
9252.														
9253.														
9254.														
9255.														
9256.														
9257.														
9258.														
9259.														
9260.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
9261.														
9262.														
9263.														
9264.														
9265.														
9266.														
9267.														
9268.														
9269.														
9270.														
9271.														
9272.														
9273.														
9274.														
9275.														
9276.														
9277.														
9278.														
9279.														
9280.														
9281.														
9282.														
9283.														
9284.														
9285.														
9286.														
9287.														
9288.														
9289.														
9290.														
9291.														
9292.														
9293.														
9294.														
9295.														
9296.														
9297.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	- - -Total Wages Subject to Medicare (Box 5 of W-2): - - - Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - - Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
9298.														
9299.														
9300.														
9301.														
9302.														
9303.														
9304.														
9305.														
9306.														
9307.														
9308.														
9309.														
9310.														
9311.														
9312.														
9313.														
9314.														
9315.														
9316.														
9317.														
9318.														
9319.														
9320.														
9321.														
9322.														
9323.														
9324.														
9325.														
9326.														
9327.														
9328.														
9329.														
9330.														
9331.														
9332.														
9333.														
9334.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	- - -Total Wages Subject to Medicare (Box 5 of W-2): - - - Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - - Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
9335.														
9336.														
9337.														
9338.														
9339.														
9340.														
9341.														
9342.														
9343.														
9344.														
9345.														
9346.														
9347.														
9348.														
9349.														
9350.														
9351.														
9352.														
9353.														
9354.														
9355.														
9356.														
9357.														
9358.														
9359.														
9360.														
9361.														
9362.														
9363.														
9364.														
9365.														
9366.														
9367.														
9368.														
9369.														
9370.														
9371.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	- - -Total Wages Subject to Medicare (Box 5 of W-2): - - - Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - - Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
9372.														
9373.														
9374.														
9375.														
9376.														
9377.														
9378.														
9379.														
9380.														
9381.														
9382.														
9383.														
9384.														
9385.														
9386.														
9387.														
9388.														
9389.														
9390.														
9391.														
9392.														
9393.														
9394.														
9395.														
9396.														
9397.														
9398.														
9399.														
9400.														
9401.														
9402.														
9403.														
9404.														
9405.														
9406.														
9407.														
9408.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
9409.														
9410.														
9411.														
9412.														
9413.														
9414.														
9415.														
9416.														
9417.														
9418.														
9419.														
9420.														
9421.														
9422.														
9423.														
9424.														
9425.														
9426.														
9427.														
9428.														
9429.														
9430.														
9431.														
9432.														
9433.														
9434.														
9435.														
9436.														
9437.														
9438.														
9439.														
9440.														
9441.														
9442.														
9443.														
9444.														
9445.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
9446.														
9447.														
9448.														
9449.														
9450.														
9451.														
9452.														
9453.														
9454.														
9455.														
9456.														
9457.														
9458.														
9459.														
9460.														
9461.														
9462.														
9463.														
9464.														
9465.														
9466.														
9467.														
9468.														
9469.														
9470.														
9471.														
9472.														
9473.														
9474.														
9475.														
9476.														
9477.														
9478.														
9479.														
9480.														
9481.														
9482.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
9483.														
9484.														
9485.														
9486.														
9487.														
9488.														
9489.														
9490.														
9491.														
9492.														
9493.														
9494.														
9495.														
9496.														
9497.														
9498.														
9499.														
9500.														
9501.														
9502.														
9503.														
9504.														
9505.														
9506.														
9507.														
9508.														
9509.														
9510.														
9511.														
9512.														
9513.														
9514.														
9515.														
9516.														
9517.														
9518.														
9519.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
9520.														
9521.														
9522.														
9523.														
9524.														
9525.														
9526.														
9527.														
9528.														
9529.														
9530.														
9531.														
9532.														
9533.														
9534.														
9535.														
9536.														
9537.														
9538.														
9539.														
9540.														
9541.														
9542.														
9543.														
9544.														
9545.														
9546.														
9547.														
9548.														
9549.														
9550.														
9551.														
9552.														
9553.														
9554.														
9555.														
9556.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
9557.														
9558.														
9559.														
9560.														
9561.														
9562.														
9563.														
9564.														
9565.														
9566.														
9567.														
9568.														
9569.														
9570.														
9571.														
9572.														
9573.														
9574.														
9575.														
9576.														
9577.														
9578.														
9579.														
9580.														
9581.														
9582.														
9583.														
9584.														
9585.														
9586.														
9587.														
9588.														
9589.														
9590.														
9591.														
9592.														
9593.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	- - -Total Wages Subject to Medicare (Box 5 of W-2): - - - Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - - Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
9594.														
9595.														
9596.														
9597.														
9598.														
9599.														
9600.														
9601.														
9602.														
9603.														
9604.														
9605.														
9606.														
9607.														
9608.														
9609.														
9610.														
9611.														
9612.														
9613.														
9614.														
9615.														
9616.														
9617.														
9618.														
9619.														
9620.														
9621.														
9622.														
9623.														
9624.														
9625.														
9626.														
9627.														
9628.														
9629.														
9630.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
9631.														
9632.														
9633.														
9634.														
9635.														
9636.														
9637.														
9638.														
9639.														
9640.														
9641.														
9642.														
9643.														
9644.														
9645.														
9646.														
9647.														
9648.														
9649.														
9650.														
9651.														
9652.														
9653.														
9654.														
9655.														
9656.														
9657.														
9658.														
9659.														
9660.														
9661.														
9662.														
9663.														
9664.														
9665.														
9666.														
9667.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
9668.														
9669.														
9670.														
9671.														
9672.														
9673.														
9674.														
9675.														
9676.														
9677.														
9678.														
9679.														
9680.														
9681.														
9682.														
9683.														
9684.														
9685.														
9686.														
9687.														
9688.														
9689.														
9690.														
9691.														
9692.														
9693.														
9694.														
9695.														
9696.														
9697.														
9698.														
9699.														
9700.														
9701.														
9702.														
9703.														
9704.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
9705.														
9706.														
9707.														
9708.														
9709.														
9710.														
9711.														
9712.														
9713.														
9714.														
9715.														
9716.														
9717.														
9718.														
9719.														
9720.														
9721.														
9722.														
9723.														
9724.														
9725.														
9726.														
9727.														
9728.														
9729.														
9730.														
9731.														
9732.														
9733.														
9734.														
9735.														
9736.														
9737.														
9738.														
9739.														
9740.														
9741.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
9742.														
9743.														
9744.														
9745.														
9746.														
9747.														
9748.														
9749.														
9750.														
9751.														
9752.														
9753.														
9754.														
9755.														
9756.														
9757.														
9758.														
9759.														
9760.														
9761.														
9762.														
9763.														
9764.														
9765.														
9766.														
9767.														
9768.														
9769.														
9770.														
9771.														
9772.														
9773.														
9774.														
9775.														
9776.														
9777.														
9778.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
9779.														
9780.														
9781.														
9782.														
9783.														
9784.														
9785.														
9786.														
9787.														
9788.														
9789.														
9790.														
9791.														
9792.														
9793.														
9794.														
9795.														
9796.														
9797.														
9798.														
9799.														
9800.														
9801.														
9802.														
9803.														
9804.														
9805.														
9806.														
9807.														
9808.														
9809.														
9810.														
9811.														
9812.														
9813.														
9814.														
9815.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
9816.														
9817.														
9818.														
9819.														
9820.														
9821.														
9822.														
9823.														
9824.														
9825.														
9826.														
9827.														
9828.														
9829.														
9830.														
9831.														
9832.														
9833.														
9834.														
9835.														
9836.														
9837.														
9838.														
9839.														
9840.														
9841.														
9842.														
9843.														
9844.														
9845.														
9846.														
9847.														
9848.														
9849.														
9850.														
9851.														
9852.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
9853.														
9854.														
9855.														
9856.														
9857.														
9858.														
9859.														
9860.														
9861.														
9862.														
9863.														
9864.														
9865.														
9866.														
9867.														
9868.														
9869.														
9870.														
9871.														
9872.														
9873.														
9874.														
9875.														
9876.														
9877.														
9878.														
9879.														
9880.														
9881.														
9882.														
9883.														
9884.														
9885.														
9886.														
9887.														
9888.														
9889.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
9890.														
9891.														
9892.														
9893.														
9894.														
9895.														
9896.														
9897.														
9898.														
9899.														
9900.														
9901.														
9902.														
9903.														
9904.														
9905.														
9906.														
9907.														
9908.														
9909.														
9910.														
9911.														
9912.														
9913.														
9914.														
9915.														
9916.														
9917.														
9918.														
9919.														
9920.														
9921.														
9922.														
9923.														
9924.														
9925.														
9926.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
9927.														
9928.														
9929.														
9930.														
9931.														
9932.														
9933.														
9934.														
9935.														
9936.														
9937.														
9938.														
9939.														
9940.														
9941.														
9942.														
9943.														
9944.														
9945.														
9946.														
9947.														
9948.														
9949.														
9950.														
9951.														
9952.														
9953.														
9954.														
9955.														
9956.														
9957.														
9958.														
9959.														
9960.														
9961.														
9962.														
9963.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
9964.														
9965.														
9966.														
9967.														
9968.														
9969.														
9970.														
9971.														
9972.														
9973.														
9974.														
9975.														
9976.														
9977.														
9978.														
9979.														
9980.														
9981.														
9982.														
9983.														
9984.														
9985.														
9986.														
9987.														
9988.														
9989.														
9990.														
9991.														
9992.														
9993.														
9994.														
9995.														
9996.														
9997.														
9998.														
9999.														
10000.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
10001.														
10002.														
10003.														
10004.														
10005.														
10006.														
10007.														
10008.														
10009.														
10010.														
10011.														
10012.														
10013.														
10014.														
10015.														
10016.														
10017.														
10018.														
10019.														
10020.														
10021.														
10022.														
10023.														
10024.														
10025.														
10026.														
10027.														
10028.														
10029.														
10030.														
10031.														
10032.														
10033.														
10034.														
10035.														
10036.														
10037.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
10038.														
10039.														
10040.														
10041.														
10042.														
10043.														
10044.														
10045.														
10046.														
10047.														
10048.														
10049.														
10050.														
10051.														
10052.														
10053.														
10054.														
10055.														
10056.														
10057.														
10058.														
10059.														
10060.														
10061.														
10062.														
10063.														
10064.														
10065.														
10066.														
10067.														
10068.														
10069.														
10070.														
10071.														
10072.														
10073.														
10074.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
10075.														
10076.														
10077.														
10078.														
10079.														
10080.														
10081.														
10082.														
10083.														
10084.														
10085.														
10086.														
10087.														
10088.														
10089.														
10090.														
10091.														
10092.														
10093.														
10094.														
10095.														
10096.														
10097.														
10098.														
10099.														
10100.														
10101.														
10102.														
10103.														
10104.														
10105.														
10106.														
10107.														
10108.														
10109.														
10110.														
10111.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	- - -Total Wages Subject to Medicare (Box 5 of W-2): - - - Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - - Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
10112.														
10113.														
10114.														
10115.														
10116.														
10117.														
10118.														
10119.														
10120.														
10121.														
10122.														
10123.														
10124.														
10125.														
10126.														
10127.														
10128.														
10129.														
10130.														
10131.														
10132.														
10133.														
10134.														
10135.														
10136.														
10137.														
10138.														
10139.														
10140.														
10141.														
10142.														
10143.														
10144.														
10145.														
10146.														
10147.														
10148.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
10149.														
10150.														
10151.														
10152.														
10153.														
10154.														
10155.														
10156.														
10157.														
10158.														
10159.														
10160.														
10161.														
10162.														
10163.														
10164.														
10165.														
10166.														
10167.														
10168.														
10169.														
10170.														
10171.														
10172.														
10173.														
10174.														
10175.														
10176.														
10177.														
10178.														
10179.														
10180.														
10181.														
10182.														
10183.														
10184.														
10185.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	- - -Total Wages Subject to Medicare (Box 5 of W-2): - - - Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - - Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
10186.														
10187.														
10188.														
10189.														
10190.														
10191.														
10192.														
10193.														
10194.														
10195.														
10196.														
10197.														
10198.														
10199.														
10200.														
10201.														
10202.														
10203.														
10204.														
10205.														
10206.														
10207.														
10208.														
10209.														
10210.														
10211.														
10212.														
10213.														
10214.														
10215.														
10216.														
10217.														
10218.														
10219.														
10220.														
10221.														
10222.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
10223.														
10224.														
10225.														
10226.														
10227.														
10228.														
10229.														
10230.														
10231.														
10232.														
10233.														
10234.														
10235.														
10236.														
10237.														
10238.														
10239.														
10240.														
10241.														
10242.														
10243.														
10244.														
10245.														
10246.														
10247.														
10248.														
10249.														
10250.														
10251.														
10252.														
10253.														
10254.														
10255.														
10256.														
10257.														
10258.														
10259.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
10260.														
10261.														
10262.														
10263.														
10264.														
10265.														
10266.														
10267.														
10268.														
10269.														
10270.														
10271.														
10272.														
10273.														
10274.														
10275.														
10276.														
10277.														
10278.														
10279.														
10280.														
10281.														
10282.														
10283.														
10284.														
10285.														
10286.														
10287.														
10288.														
10289.														
10290.														
10291.														
10292.														
10293.														
10294.														
10295.														
10296.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
10297.														
10298.														
10299.														
10300.														
10301.														
10302.														
10303.														
10304.														
10305.														
10306.														
10307.														
10308.														
10309.														
10310.														
10311.														
10312.														
10313.														
10314.														
10315.														
10316.														
10317.														
10318.														
10319.														
10320.														
10321.														
10322.														
10323.														
10324.														
10325.														
10326.														
10327.														
10328.														
10329.														
10330.														
10331.														
10332.														
10333.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
10334.														
10335.														
10336.														
10337.														
10338.														
10339.														
10340.														
10341.														
10342.														
10343.														
10344.														
10345.														
10346.														
10347.														
10348.														
10349.														
10350.														
10351.														
10352.														
10353.														
10354.														
10355.														
10356.														
10357.														
10358.														
10359.														
10360.														
10361.														
10362.														
10363.														
10364.														
10365.														
10366.														
10367.														
10368.														
10369.														
10370.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
10371.														
10372.														
10373.														
10374.														
10375.														
10376.														
10377.														
10378.														
10379.														
10380.														
10381.														
10382.														
10383.														
10384.														
10385.														
10386.														
10387.														
10388.														
10389.														
10390.														
10391.														
10392.														
10393.														
10394.														
10395.														
10396.														
10397.														
10398.														
10399.														
10400.														
10401.														
10402.														
10403.														
10404.														
10405.														
10406.														
10407.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
10408.														
10409.														
10410.														
10411.														
10412.														
10413.														
10414.														
10415.														
10416.														
10417.														
10418.														
10419.														
10420.														
10421.														
10422.														
10423.														
10424.														
10425.														
10426.														
10427.														
10428.														
10429.														
10430.														
10431.														
10432.														
10433.														
10434.														
10435.														
10436.														
10437.														
10438.														
10439.														
10440.														
10441.														
10442.														
10443.														
10444.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
10445.														
10446.														
10447.														
10448.														
10449.														
10450.														
10451.														
10452.														
10453.														
10454.														
10455.														
10456.														
10457.														
10458.														
10459.														
10460.														
10461.														
10462.														
10463.														
10464.														
10465.														
10466.														
10467.														
10468.														
10469.														
10470.														
10471.														
10472.														
10473.														
10474.														
10475.														
10476.														
10477.														
10478.														
10479.														
10480.														
10481.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
10482.														
10483.														
10484.														
10485.														
10486.														
10487.														
10488.														
10489.														
10490.														
10491.														
10492.														
10493.														
10494.														
10495.														
10496.														
10497.														
10498.														
10499.														
10500.														
10501.														
10502.														
10503.														
10504.														
10505.														
10506.														
10507.														
10508.														
10509.														
10510.														
10511.														
10512.														
10513.														
10514.														
10515.														
10516.														
10517.														
10518.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
10519.														
10520.														
10521.														
10522.														
10523.														
10524.														
10525.														
10526.														
10527.														
10528.														
10529.														
10530.														
10531.														
10532.														
10533.														
10534.														
10535.														
10536.														
10537.														
10538.														
10539.														
10540.														
10541.														
10542.														
10543.														
10544.														
10545.														
10546.														
10547.														
10548.														
10549.														
10550.														
10551.														
10552.														
10553.														
10554.														
10555.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
10556.														
10557.														
10558.														
10559.														
10560.														
10561.														
10562.														
10563.														
10564.														
10565.														
10566.														
10567.														
10568.														
10569.														
10570.														
10571.														
10572.														
10573.														
10574.														
10575.														
10576.														
10577.														
10578.														
10579.														
10580.														
10581.														
10582.														
10583.														
10584.														
10585.														
10586.														
10587.														
10588.														
10589.														
10590.														
10591.														
10592.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
10593.														
10594.														
10595.														
10596.														
10597.														
10598.														
10599.														
10600.														
10601.														
10602.														
10603.														
10604.														
10605.														
10606.														
10607.														
10608.														
10609.														
10610.														
10611.														
10612.														
10613.														
10614.														
10615.														
10616.														
10617.														
10618.														
10619.														
10620.														
10621.														
10622.														
10623.														
10624.														
10625.														
10626.														
10627.														
10628.														
10629.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
10630.														
10631.														
10632.														
10633.														
10634.														
10635.														
10636.														
10637.														
10638.														
10639.														
10640.														
10641.														
10642.														
10643.														
10644.														
10645.														
10646.														
10647.														
10648.														
10649.														
10650.														
10651.														
10652.														
10653.														
10654.														
10655.														
10656.														
10657.														
10658.														
10659.														
10660.														
10661.														
10662.														
10663.														
10664.														
10665.														
10666.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
10667.														
10668.														
10669.														
10670.														
10671.														
10672.														
10673.														
10674.														
10675.														
10676.														
10677.														
10678.														
10679.														
10680.														
10681.														
10682.														
10683.														
10684.														
10685.														
10686.														
10687.														
10688.														
10689.														
10690.														
10691.														
10692.														
10693.														
10694.														
10695.														
10696.														
10697.														
10698.														
10699.														
10700.														
10701.														
10702.														
10703.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
10704.														
10705.														
10706.														
10707.														
10708.														
10709.														
10710.														
10711.														
10712.														
10713.														
10714.														
10715.														
10716.														
10717.														
10718.														
10719.														
10720.														
10721.														
10722.														
10723.														
10724.														
10725.														
10726.														
10727.														
10728.														
10729.														
10730.														
10731.														
10732.														
10733.														
10734.														
10735.														
10736.														
10737.														
10738.														
10739.														
10740.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
10741.														
10742.														
10743.														
10744.														
10745.														
10746.														
10747.														
10748.														
10749.														
10750.														
10751.														
10752.														
10753.														
10754.														
10755.														
10756.														
10757.														
10758.														
10759.														
10760.														
10761.														
10762.														
10763.														
10764.														
10765.														
10766.														
10767.														
10768.														
10769.														
10770.														
10771.														
10772.														
10773.														
10774.														
10775.														
10776.														
10777.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
10778.														
10779.														
10780.														
10781.														
10782.														
10783.														
10784.														
10785.														
10786.														
10787.														
10788.														
10789.														
10790.														
10791.														
10792.														
10793.														
10794.														
10795.														
10796.														
10797.														
10798.														
10799.														
10800.														
10801.														
10802.														
10803.														
10804.														
10805.														
10806.														
10807.														
10808.														
10809.														
10810.														
10811.														
10812.														
10813.														
10814.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
10815.														
10816.														
10817.														
10818.														
10819.														
10820.														
10821.														
10822.														
10823.														
10824.														
10825.														
10826.														
10827.														
10828.														
10829.														
10830.														
10831.														
10832.														
10833.														
10834.														
10835.														
10836.														
10837.														
10838.														
10839.														
10840.														
10841.														
10842.														
10843.														
10844.														
10845.														
10846.														
10847.														
10848.														
10849.														
10850.														
10851.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
10852.														
10853.														
10854.														
10855.														
10856.														
10857.														
10858.														
10859.														
10860.														
10861.														
10862.														
10863.														
10864.														
10865.														
10866.														
10867.														
10868.														
10869.														
10870.														
10871.														
10872.														
10873.														
10874.														
10875.														
10876.														
10877.														
10878.														
10879.														
10880.														
10881.														
10882.														
10883.														
10884.														
10885.														
10886.														
10887.														
10888.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
10889.														
10890.														
10891.														
10892.														
10893.														
10894.														
10895.														
10896.														
10897.														
10898.														
10899.														
10900.														
10901.														
10902.														
10903.														
10904.														
10905.														
10906.														
10907.														
10908.														
10909.														
10910.														
10911.														
10912.														
10913.														
10914.														
10915.														
10916.														
10917.														
10918.														
10919.														
10920.														
10921.														
10922.														
10923.														
10924.														
10925.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	- - -Total Wages Subject to Medicare (Box 5 of W-2): - - - Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - - Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
10926.														
10927.														
10928.														
10929.														
10930.														
10931.														
10932.														
10933.														
10934.														
10935.														
10936.														
10937.														
10938.														
10939.														
10940.														
10941.														
10942.														
10943.														
10944.														
10945.														
10946.														
10947.														
10948.														
10949.														
10950.														
10951.														
10952.														
10953.														
10954.														
10955.														
10956.														
10957.														
10958.														
10959.														
10960.														
10961.														
10962.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
10963.														
10964.														
10965.														
10966.														
10967.														
10968.														
10969.														
10970.														
10971.														
10972.														
10973.														
10974.														
10975.														
10976.														
10977.														
10978.														
10979.														
10980.														
10981.														
10982.														
10983.														
10984.														
10985.														
10986.														
10987.														
10988.														
10989.														
10990.														
10991.														
10992.														
10993.														
10994.														
10995.														
10996.														
10997.														
10998.														
10999.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
11000.														
11001.														
11002.														
11003.														
11004.														
11005.														
11006.														
11007.														
11008.														
11009.														
11010.														
11011.														
11012.														
11013.														
11014.														
11015.														
11016.														
11017.														
11018.														
11019.														
11020.														
11021.														
11022.														
11023.														
11024.														
11025.														
11026.														
11027.														
11028.														
11029.														
11030.														
11031.														
11032.														
11033.														
11034.														
11035.														
11036.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
11037.														
11038.														
11039.														
11040.														
11041.														
11042.														
11043.														
11044.														
11045.														
11046.														
11047.														
11048.														
11049.														
11050.														
11051.														
11052.														
11053.														
11054.														
11055.														
11056.														
11057.														
11058.														
11059.														
11060.														
11061.														
11062.														
11063.														
11064.														
11065.														
11066.														
11067.														
11068.														
11069.														
11070.														
11071.														
11072.														
11073.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
11074.														
11075.														
11076.														
11077.														
11078.														
11079.														
11080.														
11081.														
11082.														
11083.														
11084.														
11085.														
11086.														
11087.														
11088.														
11089.														
11090.														
11091.														
11092.														
11093.														
11094.														
11095.														
11096.														
11097.														
11098.														
11099.														
11100.														
11101.														
11102.														
11103.														
11104.														
11105.														
11106.														
11107.														
11108.														
11109.														
11110.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	- - -Total Wages Subject to Medicare (Box 5 of W-2): - - - Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - - Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
11111.														
11112.														
11113.														
11114.														
11115.														
11116.														
11117.														
11118.														
11119.														
11120.														
11121.														
11122.														
11123.														
11124.														
11125.														
11126.														
11127.														
11128.														
11129.														
11130.														
11131.														
11132.														
11133.														
11134.														
11135.														
11136.														
11137.														
11138.														
11139.														
11140.														
11141.														
11142.														
11143.														
11144.														
11145.														
11146.														
11147.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
11148.														
11149.														
11150.														
11151.														
11152.														
11153.														
11154.														
11155.														
11156.														
11157.														
11158.														
11159.														
11160.														
11161.														
11162.														
11163.														
11164.														
11165.														
11166.														
11167.														
11168.														
11169.														
11170.														
11171.														
11172.														
11173.														
11174.														
11175.														
11176.														
11177.														
11178.														
11179.														
11180.														
11181.														
11182.														
11183.														
11184.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
11185.														
11186.														
11187.														
11188.														
11189.														
11190.														
11191.														
11192.														
11193.														
11194.														
11195.														
11196.														
11197.														
11198.														
11199.														
11200.														
11201.														
11202.														
11203.														
11204.														
11205.														
11206.														
11207.														
11208.														
11209.														
11210.														
11211.														
11212.														
11213.														
11214.														
11215.														
11216.														
11217.														
11218.														
11219.														
11220.														
11221.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	- - -Total Wages Subject to Medicare (Box 5 of W-2): - - - Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - - Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
11222.														
11223.														
11224.														
11225.														
11226.														
11227.														
11228.														
11229.														
11230.														
11231.														
11232.														
11233.														
11234.														
11235.														
11236.														
11237.														
11238.														
11239.														
11240.														
11241.														
11242.														
11243.														
11244.														
11245.														
11246.														
11247.														
11248.														
11249.														
11250.														
11251.														
11252.														
11253.														
11254.														
11255.														
11256.														
11257.														
11258.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
11259.														
11260.														
11261.														
11262.														
11263.														
11264.														
11265.														
11266.														
11267.														
11268.														
11269.														
11270.														
11271.														
11272.														
11273.														
11274.														
11275.														
11276.														
11277.														
11278.														
11279.														
11280.														
11281.														
11282.														
11283.														
11284.														
11285.														
11286.														
11287.														
11288.														
11289.														
11290.														
11291.														
11292.														
11293.														
11294.														
11295.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	- - -Total Wages Subject to Medicare (Box 5 of W-2): - - - Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - - Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
11296.														
11297.														
11298.														
11299.														
11300.														
11301.														
11302.														
11303.														
11304.														
11305.														
11306.														
11307.														
11308.														
11309.														
11310.														
11311.														
11312.														
11313.														
11314.														
11315.														
11316.														
11317.														
11318.														
11319.														
11320.														
11321.														
11322.														
11323.														
11324.														
11325.														
11326.														
11327.														
11328.														
11329.														
11330.														
11331.														
11332.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
11333.														
11334.														
11335.														
11336.														
11337.														
11338.														
11339.														
11340.														
11341.														
11342.														
11343.														
11344.														
11345.														
11346.														
11347.														
11348.														
11349.														
11350.														
11351.														
11352.														
11353.														
11354.														
11355.														
11356.														
11357.														
11358.														
11359.														
11360.														
11361.														
11362.														
11363.														
11364.														
11365.														
11366.														
11367.														
11368.														
11369.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
11370.														
11371.														
11372.														
11373.														
11374.														
11375.														
11376.														
11377.														
11378.														
11379.														
11380.														
11381.														
11382.														
11383.														
11384.														
11385.														
11386.														
11387.														
11388.														
11389.														
11390.														
11391.														
11392.														
11393.														
11394.														
11395.														
11396.														
11397.														
11398.														
11399.														
11400.														
11401.														
11402.														
11403.														
11404.														
11405.														
11406.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
11407.														
11408.														
11409.														
11410.														
11411.														
11412.														
11413.														
11414.														
11415.														
11416.														
11417.														
11418.														
11419.														
11420.														
11421.														
11422.														
11423.														
11424.														
11425.														
11426.														
11427.														
11428.														
11429.														
11430.														
11431.														
11432.														
11433.														
11434.														
11435.														
11436.														
11437.														
11438.														
11439.														
11440.														
11441.														
11442.														
11443.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
11444.														
11445.														
11446.														
11447.														
11448.														
11449.														
11450.														
11451.														
11452.														
11453.														
11454.														
11455.														
11456.														
11457.														
11458.														
11459.														
11460.														
11461.														
11462.														
11463.														
11464.														
11465.														
11466.														
11467.														
11468.														
11469.														
11470.														
11471.														
11472.														
11473.														
11474.														
11475.														
11476.														
11477.														
11478.														
11479.														
11480.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
11481.														
11482.														
11483.														
11484.														
11485.														
11486.														
11487.														
11488.														
11489.														
11490.														
11491.														
11492.														
11493.														
11494.														
11495.														
11496.														
11497.														
11498.														
11499.														
11500.														
11501.														
11502.														
11503.														
11504.														
11505.														
11506.														
11507.														
11508.														
11509.														
11510.														
11511.														
11512.														
11513.														
11514.														
11515.														
11516.														
11517.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
11518.														
11519.														
11520.														
11521.														
11522.														
11523.														
11524.														
11525.														
11526.														
11527.														
11528.														
11529.														
11530.														
11531.														
11532.														
11533.														
11534.														
11535.														
11536.														
11537.														
11538.														
11539.														
11540.														
11541.														
11542.														
11543.														
11544.														
11545.														
11546.														
11547.														
11548.														
11549.														
11550.														
11551.														
11552.														
11553.														
11554.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
11555.														
11556.														
11557.														
11558.														
11559.														
11560.														
11561.														
11562.														
11563.														
11564.														
11565.														
11566.														
11567.														
11568.														
11569.														
11570.														
11571.														
11572.														
11573.														
11574.														
11575.														
11576.														
11577.														
11578.														
11579.														
11580.														
11581.														
11582.														
11583.														
11584.														
11585.														
11586.														
11587.														
11588.														
11589.														
11590.														
11591.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
11592.														
11593.														
11594.														
11595.														
11596.														
11597.														
11598.														
11599.														
11600.														
11601.														
11602.														
11603.														
11604.														
11605.														
11606.														
11607.														
11608.														
11609.														
11610.														
11611.														
11612.														
11613.														
11614.														
11615.														
11616.														
11617.														
11618.														
11619.														
11620.														
11621.														
11622.														
11623.														
11624.														
11625.														
11626.														
11627.														
11628.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
11629.														
11630.														
11631.														
11632.														
11633.														
11634.														
11635.														
11636.														
11637.														
11638.														
11639.														
11640.														
11641.														
11642.														
11643.														
11644.														
11645.														
11646.														
11647.														
11648.														
11649.														
11650.														
11651.														
11652.														
11653.														
11654.														
11655.														
11656.														
11657.														
11658.														
11659.														
11660.														
11661.														
11662.														
11663.														
11664.														
11665.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
11666.														
11667.														
11668.														
11669.														
11670.														
11671.														
11672.														
11673.														
11674.														
11675.														
11676.														
11677.														
11678.														
11679.														
11680.														
11681.														
11682.														
11683.														
11684.														
11685.														
11686.														
11687.														
11688.														
11689.														
11690.														
11691.														
11692.														
11693.														
11694.														
11695.														
11696.														
11697.														
11698.														
11699.														
11700.														
11701.														
11702.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
11703.														
11704.														
11705.														
11706.														
11707.														
11708.														
11709.														
11710.														
11711.														
11712.														
11713.														
11714.														
11715.														
11716.														
11717.														
11718.														
11719.														
11720.														
11721.														
11722.														
11723.														
11724.														
11725.														
11726.														
11727.														
11728.														
11729.														
11730.														
11731.														
11732.														
11733.														
11734.														
11735.														
11736.														
11737.														
11738.														
11739.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
11740.														
11741.														
11742.														
11743.														
11744.														
11745.														
11746.														
11747.														
11748.														
11749.														
11750.														
11751.														
11752.														
11753.														
11754.														
11755.														
11756.														
11757.														
11758.														
11759.														
11760.														
11761.														
11762.														
11763.														
11764.														
11765.														
11766.														
11767.														
11768.														
11769.														
11770.														
11771.														
11772.														
11773.														
11774.														
11775.														
11776.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	- - -Total Wages Subject to Medicare (Box 5 of W-2): - - - Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - - Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
11777.														
11778.														
11779.														
11780.														
11781.														
11782.														
11783.														
11784.														
11785.														
11786.														
11787.														
11788.														
11789.														
11790.														
11791.														
11792.														
11793.														
11794.														
11795.														
11796.														
11797.														
11798.														
11799.														
11800.														
11801.														
11802.														
11803.														
11804.														
11805.														
11806.														
11807.														
11808.														
11809.														
11810.														
11811.														
11812.														
11813.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
11814.														
11815.														
11816.														
11817.														
11818.														
11819.														
11820.														
11821.														
11822.														
11823.														
11824.														
11825.														
11826.														
11827.														
11828.														
11829.														
11830.														
11831.														
11832.														
11833.														
11834.														
11835.														
11836.														
11837.														
11838.														
11839.														
11840.														
11841.														
11842.														
11843.														
11844.														
11845.														
11846.														
11847.														
11848.														
11849.														
11850.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
11851.														
11852.														
11853.														
11854.														
11855.														
11856.														
11857.														
11858.														
11859.														
11860.														
11861.														
11862.														
11863.														
11864.														
11865.														
11866.														
11867.														
11868.														
11869.														
11870.														
11871.														
11872.														
11873.														
11874.														
11875.														
11876.														
11877.														
11878.														
11879.														
11880.														
11881.														
11882.														
11883.														
11884.														
11885.														
11886.														
11887.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
11888.														
11889.														
11890.														
11891.														
11892.														
11893.														
11894.														
11895.														
11896.														
11897.														
11898.														
11899.														
11900.														
11901.														
11902.														
11903.														
11904.														
11905.														
11906.														
11907.														
11908.														
11909.														
11910.														
11911.														
11912.														
11913.														
11914.														
11915.														
11916.														
11917.														
11918.														
11919.														
11920.														
11921.														
11922.														
11923.														
11924.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
11925.														
11926.														
11927.														
11928.														
11929.														
11930.														
11931.														
11932.														
11933.														
11934.														
11935.														
11936.														
11937.														
11938.														
11939.														
11940.														
11941.														
11942.														
11943.														
11944.														
11945.														
11946.														
11947.														
11948.														
11949.														
11950.														
11951.														
11952.														
11953.														
11954.														
11955.														
11956.														
11957.														
11958.														
11959.														
11960.														
11961.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
11962.														
11963.														
11964.														
11965.														
11966.														
11967.														
11968.														
11969.														
11970.														
11971.														
11972.														
11973.														
11974.														
11975.														
11976.														
11977.														
11978.														
11979.														
11980.														
11981.														
11982.														
11983.														
11984.														
11985.														
11986.														
11987.														
11988.														
11989.														
11990.														
11991.														
11992.														
11993.														
11994.														
11995.														
11996.														
11997.														
11998.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
11999.														
12000.														
12001.														
12002.														
12003.														
12004.														
12005.														
12006.														
12007.														
12008.														
12009.														
12010.														
12011.														
12012.														
12013.														
12014.														
12015.														
12016.														
12017.														
12018.														
12019.														
12020.														
12021.														
12022.														
12023.														
12024.														
12025.														
12026.														
12027.														
12028.														
12029.														
12030.														
12031.														
12032.														
12033.														
12034.														
12035.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
12036.														
12037.														
12038.														
12039.														
12040.														
12041.														
12042.														
12043.														
12044.														
12045.														
12046.														
12047.														
12048.														
12049.														
12050.														
12051.														
12052.														
12053.														
12054.														
12055.														
12056.														
12057.														
12058.														
12059.														
12060.														
12061.														
12062.														
12063.														
12064.														
12065.														
12066.														
12067.														
12068.														
12069.														
12070.														
12071.														
12072.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
12073.														
12074.														
12075.														
12076.														
12077.														
12078.														
12079.														
12080.														
12081.														
12082.														
12083.														
12084.														
12085.														
12086.														
12087.														
12088.														
12089.														
12090.														
12091.														
12092.														
12093.														
12094.														
12095.														
12096.														
12097.														
12098.														
12099.														
12100.														
12101.														
12102.														
12103.														
12104.														
12105.														
12106.														
12107.														
12108.														
12109.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
12110.														
12111.														
12112.														
12113.														
12114.														
12115.														
12116.														
12117.														
12118.														
12119.														
12120.														
12121.														
12122.														
12123.														
12124.														
12125.														
12126.														
12127.														
12128.														
12129.														
12130.														
12131.														
12132.														
12133.														
12134.														
12135.														
12136.														
12137.														
12138.														
12139.														
12140.														
12141.														
12142.														
12143.														
12144.														
12145.														
12146.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
12147.														
12148.														
12149.														
12150.														
12151.														
12152.														
12153.														
12154.														
12155.														
12156.														
12157.														
12158.														
12159.														
12160.														
12161.														
12162.														
12163.														
12164.														
12165.														
12166.														
12167.														
12168.														
12169.														
12170.														
12171.														
12172.														
12173.														
12174.														
12175.														
12176.														
12177.														
12178.														
12179.														
12180.														
12181.														
12182.														
12183.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
12184.														
12185.														
12186.														
12187.														
12188.														
12189.														
12190.														
12191.														
12192.														
12193.														
12194.														
12195.														
12196.														
12197.														
12198.														
12199.														
12200.														
12201.														
12202.														
12203.														
12204.														
12205.														
12206.														
12207.														
12208.														
12209.														
12210.														
12211.														
12212.														
12213.														
12214.														
12215.														
12216.														
12217.														
12218.														
12219.														
12220.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
12221.														
12222.														
12223.														
12224.														
12225.														
12226.														
12227.														
12228.														
12229.														
12230.														
12231.														
12232.														
12233.														
12234.														
12235.														
12236.														
12237.														
12238.														
12239.														
12240.														
12241.														
12242.														
12243.														
12244.														
12245.														
12246.														
12247.														
12248.														
12249.														
12250.														
12251.														
12252.														
12253.														
12254.														
12255.														
12256.														
12257.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
12258.														
12259.														
12260.														
12261.														
12262.														
12263.														
12264.														
12265.														
12266.														
12267.														
12268.														
12269.														
12270.														
12271.														
12272.														
12273.														
12274.														
12275.														
12276.														
12277.														
12278.														
12279.														
12280.														
12281.														
12282.														
12283.														
12284.														
12285.														
12286.														
12287.														
12288.														
12289.														
12290.														
12291.														
12292.														
12293.														
12294.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
12295.														
12296.														
12297.														
12298.														
12299.														
12300.														
12301.														
12302.														
12303.														
12304.														
12305.														
12306.														
12307.														
12308.														
12309.														
12310.														
12311.														
12312.														
12313.														
12314.														
12315.														
12316.														
12317.														
12318.														
12319.														
12320.														
12321.														
12322.														
12323.														
12324.														
12325.														
12326.														
12327.														
12328.														
12329.														
12330.														
12331.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
12332.														
12333.														
12334.														
12335.														
12336.														
12337.														
12338.														
12339.														
12340.														
12341.														
12342.														
12343.														
12344.														
12345.														
12346.														
12347.														
12348.														
12349.														
12350.														
12351.														
12352.														
12353.														
12354.														
12355.														
12356.														
12357.														
12358.														
12359.														
12360.														
12361.														
12362.														
12363.														
12364.														
12365.														
12366.														
12367.														
12368.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
12369.														
12370.														
12371.														
12372.														
12373.														
12374.														
12375.														
12376.														
12377.														
12378.														
12379.														
12380.														
12381.														
12382.														
12383.														
12384.														
12385.														
12386.														
12387.														
12388.														
12389.														
12390.														
12391.														
12392.														
12393.														
12394.														
12395.														
12396.														
12397.														
12398.														
12399.														
12400.														
12401.														
12402.														
12403.														
12404.														
12405.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
12406.														
12407.														
12408.														
12409.														
12410.														
12411.														
12412.														
12413.														
12414.														
12415.														
12416.														
12417.														
12418.														
12419.														
12420.														
12421.														
12422.														
12423.														
12424.														
12425.														
12426.														
12427.														
12428.														
12429.														
12430.														
12431.														
12432.														
12433.														
12434.														
12435.														
12436.														
12437.														
12438.														
12439.														
12440.														
12441.														
12442.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
12443.														
12444.														
12445.														
12446.														
12447.														
12448.														
12449.														
12450.														
12451.														
12452.														
12453.														
12454.														
12455.														
12456.														
12457.														
12458.														
12459.														
12460.														
12461.														
12462.														
12463.														
12464.														
12465.														
12466.														
12467.														
12468.														
12469.														
12470.														
12471.														
12472.														
12473.														
12474.														
12475.														
12476.														
12477.														
12478.														
12479.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
12480.														
12481.														
12482.														
12483.														
12484.														
12485.														
12486.														
12487.														
12488.														
12489.														
12490.														
12491.														
12492.														
12493.														
12494.														
12495.														
12496.														
12497.														
12498.														
12499.														
12500.														
12501.														
12502.														
12503.														
12504.														
12505.														
12506.														
12507.														
12508.														
12509.														
12510.														
12511.														
12512.														
12513.														
12514.														
12515.														
12516.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	- - -Total Wages Subject to Medicare (Box 5 of W-2): - - - Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - - Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
12517.														
12518.														
12519.														
12520.														
12521.														
12522.														
12523.														
12524.														
12525.														
12526.														
12527.														
12528.														
12529.														
12530.														
12531.														
12532.														
12533.														
12534.														
12535.														
12536.														
12537.														
12538.														
12539.														
12540.														
12541.														
12542.														
12543.														
12544.														
12545.														
12546.														
12547.														
12548.														
12549.														
12550.														
12551.														
12552.														
12553.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
12554.														
12555.														
12556.														
12557.														
12558.														
12559.														
12560.														
12561.														
12562.														
12563.														
12564.														
12565.														
12566.														
12567.														
12568.														
12569.														
12570.														
12571.														
12572.														
12573.														
12574.														
12575.														
12576.														
12577.														
12578.														
12579.														
12580.														
12581.														
12582.														
12583.														
12584.														
12585.														
12586.														
12587.														
12588.														
12589.														
12590.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
12591.														
12592.														
12593.														
12594.														
12595.														
12596.														
12597.														
12598.														
12599.														
12600.														
12601.														
12602.														
12603.														
12604.														
12605.														
12606.														
12607.														
12608.														
12609.														
12610.														
12611.														
12612.														
12613.														
12614.														
12615.														
12616.														
12617.														
12618.														
12619.														
12620.														
12621.														
12622.														
12623.														
12624.														
12625.														
12626.														
12627.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
12628.														
12629.														
12630.														
12631.														
12632.														
12633.														
12634.														
12635.														
12636.														
12637.														
12638.														
12639.														
12640.														
12641.														
12642.														
12643.														
12644.														
12645.														
12646.														
12647.														
12648.														
12649.														
12650.														
12651.														
12652.														
12653.														
12654.														
12655.														
12656.														
12657.														
12658.														
12659.														
12660.														
12661.														
12662.														
12663.														
12664.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
12665.														
12666.														
12667.														
12668.														
12669.														
12670.														
12671.														
12672.														
12673.														
12674.														
12675.														
12676.														
12677.														
12678.														
12679.														
12680.														
12681.														
12682.														
12683.														
12684.														
12685.														
12686.														
12687.														
12688.														
12689.														
12690.														
12691.														
12692.														
12693.														
12694.														
12695.														
12696.														
12697.														
12698.														
12699.														
12700.														
12701.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
12702.														
12703.														
12704.														
12705.														
12706.														
12707.														
12708.														
12709.														
12710.														
12711.														
12712.														
12713.														
12714.														
12715.														
12716.														
12717.														
12718.														
12719.														
12720.														
12721.														
12722.														
12723.														
12724.														
12725.														
12726.														
12727.														
12728.														
12729.														
12730.														
12731.														
12732.														
12733.														
12734.														
12735.														
12736.														
12737.														
12738.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
12739.														
12740.														
12741.														
12742.														
12743.														
12744.														
12745.														
12746.														
12747.														
12748.														
12749.														
12750.														
12751.														
12752.														
12753.														
12754.														
12755.														
12756.														
12757.														
12758.														
12759.														
12760.														
12761.														
12762.														
12763.														
12764.														
12765.														
12766.														
12767.														
12768.														
12769.														
12770.														
12771.														
12772.														
12773.														
12774.														
12775.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
12776.														
12777.														
12778.														
12779.														
12780.														
12781.														
12782.														
12783.														
12784.														
12785.														
12786.														
12787.														
12788.														
12789.														
12790.														
12791.														
12792.														
12793.														
12794.														
12795.														
12796.														
12797.														
12798.														
12799.														
12800.														
12801.														
12802.														
12803.														
12804.														
12805.														
12806.														
12807.														
12808.														
12809.														
12810.														
12811.														
12812.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
12813.														
12814.														
12815.														
12816.														
12817.														
12818.														
12819.														
12820.														
12821.														
12822.														
12823.														
12824.														
12825.														
12826.														
12827.														
12828.														
12829.														
12830.														
12831.														
12832.														
12833.														
12834.														
12835.														
12836.														
12837.														
12838.														
12839.														
12840.														
12841.														
12842.														
12843.														
12844.														
12845.														
12846.														
12847.														
12848.														
12849.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
12850.														
12851.														
12852.														
12853.														
12854.														
12855.														
12856.														
12857.														
12858.														
12859.														
12860.														
12861.														
12862.														
12863.														
12864.														
12865.														
12866.														
12867.														
12868.														
12869.														
12870.														
12871.														
12872.														
12873.														
12874.														
12875.														
12876.														
12877.														
12878.														
12879.														
12880.														
12881.														
12882.														
12883.														
12884.														
12885.														
12886.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
12887.														
12888.														
12889.														
12890.														
12891.														
12892.														
12893.														
12894.														
12895.														
12896.														
12897.														
12898.														
12899.														
12900.														
12901.														
12902.														
12903.														
12904.														
12905.														
12906.														
12907.														
12908.														
12909.														
12910.														
12911.														
12912.														
12913.														
12914.														
12915.														
12916.														
12917.														
12918.														
12919.														
12920.														
12921.														
12922.														
12923.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
12924.														
12925.														
12926.														
12927.														
12928.														
12929.														
12930.														
12931.														
12932.														
12933.														
12934.														
12935.														
12936.														
12937.														
12938.														
12939.														
12940.														
12941.														
12942.														
12943.														
12944.														
12945.														
12946.														
12947.														
12948.														
12949.														
12950.														
12951.														
12952.														
12953.														
12954.														
12955.														
12956.														
12957.														
12958.														
12959.														
12960.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
12961.														
12962.														
12963.														
12964.														
12965.														
12966.														
12967.														
12968.														
12969.														
12970.														
12971.														
12972.														
12973.														
12974.														
12975.														
12976.														
12977.														
12978.														
12979.														
12980.														
12981.														
12982.														
12983.														
12984.														
12985.														
12986.														
12987.														
12988.														
12989.														
12990.														
12991.														
12992.														
12993.														
12994.														
12995.														
12996.														
12997.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
12998.														
12999.														
13000.														
13001.														
13002.														
13003.														
13004.														
13005.														
13006.														
13007.														
13008.														
13009.														
13010.														
13011.														
13012.														
13013.														
13014.														
13015.														
13016.														
13017.														
13018.														
13019.														
13020.														
13021.														
13022.														
13023.														
13024.														
13025.														
13026.														
13027.														
13028.														
13029.														
13030.														
13031.														
13032.														
13033.														
13034.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
13035.														
13036.														
13037.														
13038.														
13039.														
13040.														
13041.														
13042.														
13043.														
13044.														
13045.														
13046.														
13047.														
13048.														
13049.														
13050.														
13051.														
13052.														
13053.														
13054.														
13055.														
13056.														
13057.														
13058.														
13059.														
13060.														
13061.														
13062.														
13063.														
13064.														
13065.														
13066.														
13067.														
13068.														
13069.														
13070.														
13071.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
13072.														
13073.														
13074.														
13075.														
13076.														
13077.														
13078.														
13079.														
13080.														
13081.														
13082.														
13083.														
13084.														
13085.														
13086.														
13087.														
13088.														
13089.														
13090.														
13091.														
13092.														
13093.														
13094.														
13095.														
13096.														
13097.														
13098.														
13099.														
13100.														
13101.														
13102.														
13103.														
13104.														
13105.														
13106.														
13107.														
13108.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
13109.														
13110.														
13111.														
13112.														
13113.														
13114.														
13115.														
13116.														
13117.														
13118.														
13119.														
13120.														
13121.														
13122.														
13123.														
13124.														
13125.														
13126.														
13127.														
13128.														
13129.														
13130.														
13131.														
13132.														
13133.														
13134.														
13135.														
13136.														
13137.														
13138.														
13139.														
13140.														
13141.														
13142.														
13143.														
13144.														
13145.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
13146.														
13147.														
13148.														
13149.														
13150.														
13151.														
13152.														
13153.														
13154.														
13155.														
13156.														
13157.														
13158.														
13159.														
13160.														
13161.														
13162.														
13163.														
13164.														
13165.														
13166.														
13167.														
13168.														
13169.														
13170.														
13171.														
13172.														
13173.														
13174.														
13175.														
13176.														
13177.														
13178.														
13179.														
13180.														
13181.														
13182.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
13183.														
13184.														
13185.														
13186.														
13187.														
13188.														
13189.														
13190.														
13191.														
13192.														
13193.														
13194.														
13195.														
13196.														
13197.														
13198.														
13199.														
13200.														
13201.														
13202.														
13203.														
13204.														
13205.														
13206.														
13207.														
13208.														
13209.														
13210.														
13211.														
13212.														
13213.														
13214.														
13215.														
13216.														
13217.														
13218.														
13219.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
13220.														
13221.														
13222.														
13223.														
13224.														
13225.														
13226.														
13227.														
13228.														
13229.														
13230.														
13231.														
13232.														
13233.														
13234.														
13235.														
13236.														
13237.														
13238.														
13239.														
13240.														
13241.														
13242.														
13243.														
13244.														
13245.														
13246.														
13247.														
13248.														
13249.														
13250.														
13251.														
13252.														
13253.														
13254.														
13255.														
13256.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
13257.														
13258.														
13259.														
13260.														
13261.														
13262.														
13263.														
13264.														
13265.														
13266.														
13267.														
13268.														
13269.														
13270.														
13271.														
13272.														
13273.														
13274.														
13275.														
13276.														
13277.														
13278.														
13279.														
13280.														
13281.														
13282.														
13283.														
13284.														
13285.														
13286.														
13287.														
13288.														
13289.														
13290.														
13291.														
13292.														
13293.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
13294.														
13295.														
13296.														
13297.														
13298.														
13299.														
13300.														
13301.														
13302.														
13303.														
13304.														
13305.														
13306.														
13307.														
13308.														
13309.														
13310.														
13311.														
13312.														
13313.														
13314.														
13315.														
13316.														
13317.														
13318.														
13319.														
13320.														
13321.														
13322.														
13323.														
13324.														
13325.														
13326.														
13327.														
13328.														
13329.														
13330.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	- - -Total Wages Subject to Medicare (Box 5 of W-2): - - - Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - - Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
13331.														
13332.														
13333.														
13334.														
13335.														
13336.														
13337.														
13338.														
13339.														
13340.														
13341.														
13342.														
13343.														
13344.														
13345.														
13346.														
13347.														
13348.														
13349.														
13350.														
13351.														
13352.														
13353.														
13354.														
13355.														
13356.														
13357.														
13358.														
13359.														
13360.														
13361.														
13362.														
13363.														
13364.														
13365.														
13366.														
13367.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
13368.														
13369.														
13370.														
13371.														
13372.														
13373.														
13374.														
13375.														
13376.														
13377.														
13378.														
13379.														
13380.														
13381.														
13382.														
13383.														
13384.														
13385.														
13386.														
13387.														
13388.														
13389.														
13390.														
13391.														
13392.														
13393.														
13394.														
13395.														
13396.														
13397.														
13398.														
13399.														
13400.														
13401.														
13402.														
13403.														
13404.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	- - -Total Wages Subject to Medicare (Box 5 of W-2): - - - Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - - Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
13405.														
13406.														
13407.														
13408.														
13409.														
13410.														
13411.														
13412.														
13413.														
13414.														
13415.														
13416.														
13417.														
13418.														
13419.														
13420.														
13421.														
13422.														
13423.														
13424.														
13425.														
13426.														
13427.														
13428.														
13429.														
13430.														
13431.														
13432.														
13433.														
13434.														
13435.														
13436.														
13437.														
13438.														
13439.														
13440.														
13441.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
13442.														
13443.														
13444.														
13445.														
13446.														
13447.														
13448.														
13449.														
13450.														
13451.														
13452.														
13453.														
13454.														
13455.														
13456.														
13457.														
13458.														
13459.														
13460.														
13461.														
13462.														
13463.														
13464.														
13465.														
13466.														
13467.														
13468.														
13469.														
13470.														
13471.														
13472.														
13473.														
13474.														
13475.														
13476.														
13477.														
13478.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
13479.														
13480.														
13481.														
13482.														
13483.														
13484.														
13485.														
13486.														
13487.														
13488.														
13489.														
13490.														
13491.														
13492.														
13493.														
13494.														
13495.														
13496.														
13497.														
13498.														
13499.														
13500.														
13501.														
13502.														
13503.														
13504.														
13505.														
13506.														
13507.														
13508.														
13509.														
13510.														
13511.														
13512.														
13513.														
13514.														
13515.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
13516.														
13517.														
13518.														
13519.														
13520.														
13521.														
13522.														
13523.														
13524.														
13525.														
13526.														
13527.														
13528.														
13529.														
13530.														
13531.														
13532.														
13533.														
13534.														
13535.														
13536.														
13537.														
13538.														
13539.														
13540.														
13541.														
13542.														
13543.														
13544.														
13545.														
13546.														
13547.														
13548.														
13549.														
13550.														
13551.														
13552.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
13553.														
13554.														
13555.														
13556.														
13557.														
13558.														
13559.														
13560.														
13561.														
13562.														
13563.														
13564.														
13565.														
13566.														
13567.														
13568.														
13569.														
13570.														
13571.														
13572.														
13573.														
13574.														
13575.														
13576.														
13577.														
13578.														
13579.														
13580.														
13581.														
13582.														
13583.														
13584.														
13585.														
13586.														
13587.														
13588.														
13589.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
13590.														
13591.														
13592.														
13593.														
13594.														
13595.														
13596.														
13597.														
13598.														
13599.														
13600.														
13601.														
13602.														
13603.														
13604.														
13605.														
13606.														
13607.														
13608.														
13609.														
13610.														
13611.														
13612.														
13613.														
13614.														
13615.														
13616.														
13617.														
13618.														
13619.														
13620.														
13621.														
13622.														
13623.														
13624.														
13625.														
13626.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
13627.														
13628.														
13629.														
13630.														
13631.														
13632.														
13633.														
13634.														
13635.														
13636.														
13637.														
13638.														
13639.														
13640.														
13641.														
13642.														
13643.														
13644.														
13645.														
13646.														
13647.														
13648.														
13649.														
13650.														
13651.														
13652.														
13653.														
13654.														
13655.														
13656.														
13657.														
13658.														
13659.														
13660.														
13661.														
13662.														
13663.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
13664.														
13665.														
13666.														
13667.														
13668.														
13669.														
13670.														
13671.														
13672.														
13673.														
13674.														
13675.														
13676.														
13677.														
13678.														
13679.														
13680.														
13681.														
13682.														
13683.														
13684.														
13685.														
13686.														
13687.														
13688.														
13689.														
13690.														
13691.														
13692.														
13693.														
13694.														
13695.														
13696.														
13697.														
13698.														
13699.														
13700.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
13701.														
13702.														
13703.														
13704.														
13705.														
13706.														
13707.														
13708.														
13709.														
13710.														
13711.														
13712.														
13713.														
13714.														
13715.														
13716.														
13717.														
13718.														
13719.														
13720.														
13721.														
13722.														
13723.														
13724.														
13725.														
13726.														
13727.														
13728.														
13729.														
13730.														
13731.														
13732.														
13733.														
13734.														
13735.														
13736.														
13737.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
13738.														
13739.														
13740.														
13741.														
13742.														
13743.														
13744.														
13745.														
13746.														
13747.														
13748.														
13749.														
13750.														
13751.														
13752.														
13753.														
13754.														
13755.														
13756.														
13757.														
13758.														
13759.														
13760.														
13761.														
13762.														
13763.														
13764.														
13765.														
13766.														
13767.														
13768.														
13769.														
13770.														
13771.														
13772.														
13773.														
13774.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
13775.														
13776.														
13777.														
13778.														
13779.														
13780.														
13781.														
13782.														
13783.														
13784.														
13785.														
13786.														
13787.														
13788.														
13789.														
13790.														
13791.														
13792.														
13793.														
13794.														
13795.														
13796.														
13797.														
13798.														
13799.														
13800.														
13801.														
13802.														
13803.														
13804.														
13805.														
13806.														
13807.														
13808.														
13809.														
13810.														
13811.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
13812.														
13813.														
13814.														
13815.														
13816.														
13817.														
13818.														
13819.														
13820.														
13821.														
13822.														
13823.														
13824.														
13825.														
13826.														
13827.														
13828.														
13829.														
13830.														
13831.														
13832.														
13833.														
13834.														
13835.														
13836.														
13837.														
13838.														
13839.														
13840.														
13841.														
13842.														
13843.														
13844.														
13845.														
13846.														
13847.														
13848.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
13849.														
13850.														
13851.														
13852.														
13853.														
13854.														
13855.														
13856.														
13857.														
13858.														
13859.														
13860.														
13861.														
13862.														
13863.														
13864.														
13865.														
13866.														
13867.														
13868.														
13869.														
13870.														
13871.														
13872.														
13873.														
13874.														
13875.														
13876.														
13877.														
13878.														
13879.														
13880.														
13881.														
13882.														
13883.														
13884.														
13885.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	- - -Total Wages Subject to Medicare (Box 5 of W-2): - - - Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - - Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
13886.														
13887.														
13888.														
13889.														
13890.														
13891.														
13892.														
13893.														
13894.														
13895.														
13896.														
13897.														
13898.														
13899.														
13900.														
13901.														
13902.														
13903.														
13904.														
13905.														
13906.														
13907.														
13908.														
13909.														
13910.														
13911.														
13912.														
13913.														
13914.														
13915.														
13916.														
13917.														
13918.														
13919.														
13920.														
13921.														
13922.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
13923.														
13924.														
13925.														
13926.														
13927.														
13928.														
13929.														
13930.														
13931.														
13932.														
13933.														
13934.														
13935.														
13936.														
13937.														
13938.														
13939.														
13940.														
13941.														
13942.														
13943.														
13944.														
13945.														
13946.														
13947.														
13948.														
13949.														
13950.														
13951.														
13952.														
13953.														
13954.														
13955.														
13956.														
13957.														
13958.														
13959.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
13960.														
13961.														
13962.														
13963.														
13964.														
13965.														
13966.														
13967.														
13968.														
13969.														
13970.														
13971.														
13972.														
13973.														
13974.														
13975.														
13976.														
13977.														
13978.														
13979.														
13980.														
13981.														
13982.														
13983.														
13984.														
13985.														
13986.														
13987.														
13988.														
13989.														
13990.														
13991.														
13992.														
13993.														
13994.														
13995.														
13996.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
13997.														
13998.														
13999.														
14000.														
14001.														
14002.														
14003.														
14004.														
14005.														
14006.														
14007.														
14008.														
14009.														
14010.														
14011.														
14012.														
14013.														
14014.														
14015.														
14016.														
14017.														
14018.														
14019.														
14020.														
14021.														
14022.														
14023.														
14024.														
14025.														
14026.														
14027.														
14028.														
14029.														
14030.														
14031.														
14032.														
14033.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
14034.														
14035.														
14036.														
14037.														
14038.														
14039.														
14040.														
14041.														
14042.														
14043.														
14044.														
14045.														
14046.														
14047.														
14048.														
14049.														
14050.														
14051.														
14052.														
14053.														
14054.														
14055.														
14056.														
14057.														
14058.														
14059.														
14060.														
14061.														
14062.														
14063.														
14064.														
14065.														
14066.														
14067.														
14068.														
14069.														
14070.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
14071.														
14072.														
14073.														
14074.														
14075.														
14076.														
14077.														
14078.														
14079.														
14080.														
14081.														
14082.														
14083.														
14084.														
14085.														
14086.														
14087.														
14088.														
14089.														
14090.														
14091.														
14092.														
14093.														
14094.														
14095.														
14096.														
14097.														
14098.														
14099.														
14100.														
14101.														
14102.														
14103.														
14104.														
14105.														
14106.														
14107.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
14108.														
14109.														
14110.														
14111.														
14112.														
14113.														
14114.														
14115.														
14116.														
14117.														
14118.														
14119.														
14120.														
14121.														
14122.														
14123.														
14124.														
14125.														
14126.														
14127.														
14128.														
14129.														
14130.														
14131.														
14132.														
14133.														
14134.														
14135.														
14136.														
14137.														
14138.														
14139.														
14140.														
14141.														
14142.														
14143.														
14144.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
14145.														
14146.														
14147.														
14148.														
14149.														
14150.														
14151.														
14152.														
14153.														
14154.														
14155.														
14156.														
14157.														
14158.														
14159.														
14160.														
14161.														
14162.														
14163.														
14164.														
14165.														
14166.														
14167.														
14168.														
14169.														
14170.														
14171.														
14172.														
14173.														
14174.														
14175.														
14176.														
14177.														
14178.														
14179.														
14180.														
14181.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
14182.														
14183.														
14184.														
14185.														
14186.														
14187.														
14188.														
14189.														
14190.														
14191.														
14192.														
14193.														
14194.														
14195.														
14196.														
14197.														
14198.														
14199.														
14200.														
14201.														
14202.														
14203.														
14204.														
14205.														
14206.														
14207.														
14208.														
14209.														
14210.														
14211.														
14212.														
14213.														
14214.														
14215.														
14216.														
14217.														
14218.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
14219.														
14220.														
14221.														
14222.														
14223.														
14224.														
14225.														
14226.														
14227.														
14228.														
14229.														
14230.														
14231.														
14232.														
14233.														
14234.														
14235.														
14236.														
14237.														
14238.														
14239.														
14240.														
14241.														
14242.														
14243.														
14244.														
14245.														
14246.														
14247.														
14248.														
14249.														
14250.														
14251.														
14252.														
14253.														
14254.														
14255.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
14256.														
14257.														
14258.														
14259.														
14260.														
14261.														
14262.														
14263.														
14264.														
14265.														
14266.														
14267.														
14268.														
14269.														
14270.														
14271.														
14272.														
14273.														
14274.														
14275.														
14276.														
14277.														
14278.														
14279.														
14280.														
14281.														
14282.														
14283.														
14284.														
14285.														
14286.														
14287.														
14288.														
14289.														
14290.														
14291.														
14292.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
14293.														
14294.														
14295.														
14296.														
14297.														
14298.														
14299.														
14300.														
14301.														
14302.														
14303.														
14304.														
14305.														
14306.														
14307.														
14308.														
14309.														
14310.														
14311.														
14312.														
14313.														
14314.														
14315.														
14316.														
14317.														
14318.														
14319.														
14320.														
14321.														
14322.														
14323.														
14324.														
14325.														
14326.														
14327.														
14328.														
14329.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
14330.														
14331.														
14332.														
14333.														
14334.														
14335.														
14336.														
14337.														
14338.														
14339.														
14340.														
14341.														
14342.														
14343.														
14344.														
14345.														
14346.														
14347.														
14348.														
14349.														
14350.														
14351.														
14352.														
14353.														
14354.														
14355.														
14356.														
14357.														
14358.														
14359.														
14360.														
14361.														
14362.														
14363.														
14364.														
14365.														
14366.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
14367.														
14368.														
14369.														
14370.														
14371.														
14372.														
14373.														
14374.														
14375.														
14376.														
14377.														
14378.														
14379.														
14380.														
14381.														
14382.														
14383.														
14384.														
14385.														
14386.														
14387.														
14388.														
14389.														
14390.														
14391.														
14392.														
14393.														
14394.														
14395.														
14396.														
14397.														
14398.														
14399.														
14400.														
14401.														
14402.														
14403.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
14404.														
14405.														
14406.														
14407.														
14408.														
14409.														
14410.														
14411.														
14412.														
14413.														
14414.														
14415.														
14416.														
14417.														
14418.														
14419.														
14420.														
14421.														
14422.														
14423.														
14424.														
14425.														
14426.														
14427.														
14428.														
14429.														
14430.														
14431.														
14432.														
14433.														
14434.														
14435.														
14436.														
14437.														
14438.														
14439.														
14440.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
14441.														
14442.														
14443.														
14444.														
14445.														
14446.														
14447.														
14448.														
14449.														
14450.														
14451.														
14452.														
14453.														
14454.														
14455.														
14456.														
14457.														
14458.														
14459.														
14460.														
14461.														
14462.														
14463.														
14464.														
14465.														
14466.														
14467.														
14468.														
14469.														
14470.														
14471.														
14472.														
14473.														
14474.														
14475.														
14476.														
14477.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
14478.														
14479.														
14480.														
14481.														
14482.														
14483.														
14484.														
14485.														
14486.														
14487.														
14488.														
14489.														
14490.														
14491.														
14492.														
14493.														
14494.														
14495.														
14496.														
14497.														
14498.														
14499.														
14500.														
14501.														
14502.														
14503.														
14504.														
14505.														
14506.														
14507.														
14508.														
14509.														
14510.														
14511.														
14512.														
14513.														
14514.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
14515.														
14516.														
14517.														
14518.														
14519.														
14520.														
14521.														
14522.														
14523.														
14524.														
14525.														
14526.														
14527.														
14528.														
14529.														
14530.														
14531.														
14532.														
14533.														
14534.														
14535.														
14536.														
14537.														
14538.														
14539.														
14540.														
14541.														
14542.														
14543.														
14544.														
14545.														
14546.														
14547.														
14548.														
14549.														
14550.														
14551.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
14552.														
14553.														
14554.														
14555.														
14556.														
14557.														
14558.														
14559.														
14560.														
14561.														
14562.														
14563.														
14564.														
14565.														
14566.														
14567.														
14568.														
14569.														
14570.														
14571.														
14572.														
14573.														
14574.														
14575.														
14576.														
14577.														
14578.														
14579.														
14580.														
14581.														
14582.														
14583.														
14584.														
14585.														
14586.														
14587.														
14588.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - -			
Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
14589.														
14590.														
14591.														
14592.														
14593.														
14594.														
14595.														
14596.														
14597.														
14598.														
14599.														
14600.														
14601.														
14602.														
14603.														
14604.														
14605.														
14606.														
14607.														
14608.														
14609.														
14610.														
14611.														
14612.														
14613.														
14614.														
14615.														
14616.														
14617.														
14618.														
14619.														
14620.														
14621.														
14622.														
14623.														
14624.														
14625.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
14626.														
14627.														
14628.														
14629.														
14630.														
14631.														
14632.														
14633.														
14634.														
14635.														
14636.														
14637.														
14638.														
14639.														
14640.														
14641.														
14642.														
14643.														
14644.														
14645.														
14646.														
14647.														
14648.														
14649.														
14650.														
14651.														
14652.														
14653.														
14654.														
14655.														
14656.														
14657.														
14658.														
14659.														
14660.														
14661.														
14662.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
14663.														
14664.														
14665.														
14666.														
14667.														
14668.														
14669.														
14670.														
14671.														
14672.														
14673.														
14674.														
14675.														
14676.														
14677.														
14678.														
14679.														
14680.														
14681.														
14682.														
14683.														
14684.														
14685.														
14686.														
14687.														
14688.														
14689.														
14690.														
14691.														
14692.														
14693.														
14694.														
14695.														
14696.														
14697.														
14698.														
14699.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
14700.														
14701.														
14702.														
14703.														
14704.														
14705.														
14706.														
14707.														
14708.														
14709.														
14710.														
14711.														
14712.														
14713.														
14714.														
14715.														
14716.														
14717.														
14718.														
14719.														
14720.														
14721.														
14722.														
14723.														
14724.														
14725.														
14726.														
14727.														
14728.														
14729.														
14730.														
14731.														
14732.														
14733.														
14734.														
14735.														
14736.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	- - -Total Wages Subject to Medicare (Box 5 of W-2): - - - Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - - Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
14737.														
14738.														
14739.														
14740.														
14741.														
14742.														
14743.														
14744.														
14745.														
14746.														
14747.														
14748.														
14749.														
14750.														
14751.														
14752.														
14753.														
14754.														
14755.														
14756.														
14757.														
14758.														
14759.														
14760.														
14761.														
14762.														
14763.														
14764.														
14765.														
14766.														
14767.														
14768.														
14769.														
14770.														
14771.														
14772.														
14773.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
14774.														
14775.														
14776.														
14777.														
14778.														
14779.														
14780.														
14781.														
14782.														
14783.														
14784.														
14785.														
14786.														
14787.														
14788.														
14789.														
14790.														
14791.														
14792.														
14793.														
14794.														
14795.														
14796.														
14797.														
14798.														
14799.														
14800.														
14801.														
14802.														
14803.														
14804.														
14805.														
14806.														
14807.														
14808.														
14809.														
14810.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
14811.														
14812.														
14813.														
14814.														
14815.														
14816.														
14817.														
14818.														
14819.														
14820.														
14821.														
14822.														
14823.														
14824.														
14825.														
14826.														
14827.														
14828.														
14829.														
14830.														
14831.														
14832.														
14833.														
14834.														
14835.														
14836.														
14837.														
14838.														
14839.														
14840.														
14841.														
14842.														
14843.														
14844.														
14845.														
14846.														
14847.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
14848.														
14849.														
14850.														
14851.														
14852.														
14853.														
14854.														
14855.														
14856.														
14857.														
14858.														
14859.														
14860.														
14861.														
14862.														
14863.														
14864.														
14865.														
14866.														
14867.														
14868.														
14869.														
14870.														
14871.														
14872.														
14873.														
14874.														
14875.														
14876.														
14877.														
14878.														
14879.														
14880.														
14881.														
14882.														
14883.														
14884.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
14885.														
14886.														
14887.														
14888.														
14889.														
14890.														
14891.														
14892.														
14893.														
14894.														
14895.														
14896.														
14897.														
14898.														
14899.														
14900.														
14901.														
14902.														
14903.														
14904.														
14905.														
14906.														
14907.														
14908.														
14909.														
14910.														
14911.														
14912.														
14913.														
14914.														
14915.														
14916.														
14917.														
14918.														
14919.														
14920.														
14921.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
14922.														
14923.														
14924.														
14925.														
14926.														
14927.														
14928.														
14929.														
14930.														
14931.														
14932.														
14933.														
14934.														
14935.														
14936.														
14937.														
14938.														
14939.														
14940.														
14941.														
14942.														
14943.														
14944.														
14945.														
14946.														
14947.														
14948.														
14949.														
14950.														
14951.														
14952.														
14953.														
14954.														
14955.														
14956.														
14957.														
14958.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
						- - -Total Wages Subject to Medicare (Box 5 of W-2): - - -					- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - -			
14959.														
14960.														
14961.														
14962.														
14963.														
14964.														
14965.														
14966.														
14967.														
14968.														
14969.														
14970.														
14971.														
14972.														
14973.														
14974.														
14975.														
14976.														
14977.														
14978.														
14979.														
14980.														
14981.														
14982.														
14983.														
14984.														
14985.														
14986.														
14987.														
14988.														
14989.														
14990.														
14991.														
14992.														
14993.														
14994.														
14995.														

State Controller's Office - Division of Accounting and Reporting

Cities - Local Government Compensation Report - Calendar Year 2011

Entity Name: Paradise

Human Resources Web Page: http//townofpardise.com/index.php/departments/humanresources/home

Employees Hold more than One Position? Yes (Enter 'Yes' or 'No')

'Save As' Filename: 2011-11980463000.xlsx

Please identify the employees holding more than one position by using the 'Multiple Positions Footnote' column.

Preparer Contact Information

Preparer Name: Gina Will

Phone Number: (530) 872-6212

E-mail Address: gwill@townofparadise.com

Line #	Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	- - -Total Wages Subject to Medicare (Box 5 of W-2): - - - Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	- - - - - - - - - - - - - - - Employer Contribution: - - - - - - - - - - - - - - - Employees' Share of Pension Benefits	Defined Benefit Plan	Deferred Compensation/ Defined Contribution Plan	Health, Dental, Vision
14996.														
14997.														
14998.														
14999.														
15000.														