APPROVED BY ORANGE COUNTY BOARD OF COUNTY COMMISSIONERS

BCC Mtg. Date: July 19, 2016

Memorandum

July 8, 2016

TO:

Mayor Teresa Jacobs

-AND-

Board of County Commissioners

FROM:

J. Ricardo Daye, Director

Human Resources Division

SUBJECT:

BCC Consent Agenda - July 19, 2016

Approval for Payment – Florida Retirement System (FRS) Invoice #220095

A veteran county fire fighter retired in January 2016 after being out on an extended leave of absence due to a serious health condition. When this employee met with the Human Resources Division (HRD) in early February to process his paperwork, he indicated that he had exercised his second election option to transfer from the Florida Retirement System (FRS) Pension Plan to the Investment Plan. HRD validated this information with FRS and completed his Investment Plan retirement effective January 3, 2016.

At the end of March, this employee contacted HRD again because he was not able to access his FRS Investment Plan account. In researching this issue, it was determined that this employee's second election option to transfer to the Investment Plan was reversed back to the Pension Plan because the election was made after the employee's retirement date. This situation occurred because there was some uncertainty as to his actual retirement date as a result of the employee's extended leave of absence.

In order to reestablish the employee's second election option from the Pension Plan to the Investment Plan, HRD initiated a revised retirement date of January 31, 2016. Due to the valuation differential in the Investment Plan, the County has been invoiced by the FRS in the amount of \$31,451.49.

Action Requested: Authorization to pay the Florida Retirement System Invoice #220095 in the amount of \$31,451.49.

cc:

Ajit Lalchandani, County Administrator Eric Gassman, Chief Accountability Officer

Patrick Peters, HR Administrator



Rick Scott, Governor

Chad Poppell, Secretary

To: 58003

ORANGE CO BD OF CO COMMISSIONERS

PAYROLL DEPARTMENT

PO BOX 38

ORLANDO FL 32802

Invoice Date	4/29/2016			
Section	Office of Defined Contributions			
Contact Number	(850) 488-4406			

Loss in ABO invoice

Invoice Description	Amount Due
Loss in ABO invoice	
The reinstatement of this member resulted in an earnings adjustment for his account. Please see the attached spreadsheet which details the calculation of the amount due required from your agency.	
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CTF-IP ER Contributions-NonSt	31,451.49
Attention: To ensure accurate processing of your account, indicate invoice number with your payment.	
	31,451.49

PLEASE MAKE CHECKS PAYABLE TO THE FLORIDA RETIREMENT SYSTEM.

A DELINQUENT FEE OF 1% PER MONTH WILL BE ASSESSED ON AMOUNTS NOT PAID WITHIN 30 DAYS FROM THE DATE OF THE INVOICE.

Activity	Date	Fund	Share Price	Shares	\$ Amount	
ABO Transfer	2/26/2016	FRS Retirement 2030	\$9.360130	44,939.113025	\$ 420,635.94	Original ABO Transferred
ABO ITAIISIEI	4/18/2016	FRS Retirement 2030	\$10.059999	44,939.113025	\$ 452,087.43	Current Value of Original Shares
						Cost to Make Member Whole
ı	1	1	i :			(Difference between ABO Transfer
	L					\$ 31,451.49 Amount & Current Value)

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