

HUERFANO COUNTY

<b>GREEN SHEET/STATUS CHANGE</b>		EFFECTIVE DATE
		4/10/2023
NAME: <b>Hallie Coulter</b>	PAYROLL :	4/14/2023

CHANGE OF ADDRESS/PHONE	STREET	<b>5242 CR 230</b>
	CITY, STATE, ZIP	<b>Walsenburg CO 81089</b>
	TELEPHONE	

CHANGE	FROM (DOES NOT APPLY TO NEW EMPLOYEE)	TO
JOB TITLE	<b>SCW IV Adult Services</b>	<b>Adult Services Manager</b>
DEPARTMENT	<b>Dept of Human Services</b>	<b>Dept of Human Services</b>
HOURS		
ANNUAL SALARY	<b>\$51,500.00</b>	<b>\$56,000.00</b>
SEMI-MONTHLY SALARY		
HOURLY SALARY		
OTHER SALARY		

**REASON FOR CHANGE**

- |           |                              |                                    |
|-----------|------------------------------|------------------------------------|
| NEWHIRE   | RESIGNATION                  | LENGTH OF SERVICE INCREASE         |
| REHIRED   | RETIREMENT                   | <b>REEVALUATION OF CURRENT JOB</b> |
| PROMOTION | LAYOFF                       | INTRODUCTORY PERIOD COMPLETED      |
| DEMOTION  | ADMINISTRATIVE LEAVE PAID    | OTHER                              |
| TRANSFER  | ADMINISTRATIVE LEAVE UN-PAID |                                    |

COMMENTS, IF NECESSARY

**Motion to promote Hallie Coulter to an Adult Services Manager I effective April 10, 2023**

I, Sheila Hudson-Macchietto, Director certify that the above presented information has been requested by the Department Head and or Elected Official directly responsible for the employee named within. I certify that I have received all proper documentaion and that I have entered the information on the Green Sheet to reflect the change as requested.

Sheila Hudson-Macchietto 03/29/2023

Signature of preparer

Date Signed

John Galusha-Board Chairman

Arica Andreatta, Vice Chairman

Karl Sporleder, Commissioner

Date

Date to Finance Office: