BOYNTON-MOTON SCHOOL DISTRICT MANDATORY ANNEXATION TO HASKELL - MUSKOGEE CO & MIDWAY - MCINTOSH COUNTY - JULY 1, 2011 SEVERANCE WORKSHEET (CONGRESSIONAL DISTRICT NO. 2)

Certified Staff Requesti	ng Severance	(11 Requests)	Salary	Requested 80%	Unemployment/TRS	Other Employment	Total Sev Due
Deana Bias	Teacher		\$31,600.00	\$25,280.00	\$6,150.00		\$7,652.00
John Gamble	Teacher		\$39,700.00	\$31,760.00	\$7,400.00		\$9,744.00
Frances Johnson	Librarian	•	\$7,500.00	\$6,000.00	\$3,376.00		\$1,312.00
James Johnson	Counselor		\$7,500.00	\$6,000.00	\$3,530.00		\$988.00
Mildred Jones	Teacher		\$38,850.00	\$31,080.00	\$7,400.00		\$14,208.00
Veneta Ray	Teacher/Principal		\$55,000.00	\$44,000.00	\$7,400.00		\$14,640.00
Martha Sellers	Remedial Specialist		\$32,880.00	\$26,304.00	\$2,096.84		\$9,683.00
Lynwood Wade	P. E. Teacher/Tutor		\$32,350.00	\$25,880.00	\$7,400.00		\$7,392.00
Michelle Washington	Teacher		\$37,225.00	\$29,780.00	\$7,400.00		\$8,952.00
Shelbie Williams	Superintendent	* See Final Audit (SA&I)	\$90,400.00	\$72,320.00	\$7,400.00	* Less Adjustment	\$1.00
Sequita Woodard	Teacher		\$42,325.00	\$33,860.00	\$7,400.00	•	\$21,168.00
		Total	\$415,330.00	\$332,264.00			\$95,740.00
Support Staff Requestir	ng Severance	(9 Requests)	Salary	Requested 80%	Unemployment/TRS	Other Employment	Total Sev Due
Elsie Ceasar	Receptionist		\$15,235.00	\$12,188.00	\$5,486.00	\$396.00	\$2,522.00
Jodea Howard	Teaching Assistant	No Response			. ,	*******	+=,0==:00
Martin Miller	Custodian		\$13,965.00	\$11,172.00	\$4,680.00		\$2,597.00
Joe Mitchell	Mechanic		\$15,500.00	\$12,400.00	\$5,018.00		\$2,953.00
Jordan Reed	Teaching Assistant/Cod	ok	\$4,649.00	\$3,719.00			\$1,488.00
Valerie Reed	Cook		\$23,383.00	\$18,706.00			\$7,482.00
Billie Tennison	Counselor		\$8,090.00	\$6,472.00	\$2,007.00		\$1,786.00
Jeffrey Ward	Bus Driver		\$10,550.00	\$8,440.00	,		\$3,376.00
Brenda Wesley	Encumbrance Clerk/Te	aching Assistant	\$29,122.00	\$23,298.00			\$9,319.00
			\$120,494.00	\$96,395.00			\$31,523.00
Grand Total Severance Requested By Former Boynton-Moton Employees		ynton-Moton Employees	\$127,263.00				
Total Amount Severance Paid To Former Boynton-Moton Employees			Pending				

Prepared by Vivian Baber 12/1/2011

Fu	ll Legal Name: Deana Marie Bias				Date: _		9/1/2011
Pre	evious Base Salary (exclusive of fringe be Base Salary Times 80% Maximum Severance	enefits):	<u>*</u> \$	31,600.00 25,280.00		\$	25,280.00
Les 1)	s Weekly/Monthly Income or Benefits: Unemployment Teacher Retirement Workers Compensation Other employment		\$	6,150.00	No. of Pay Periods X * MBA X X X	\$ \$ \$ \$	(6,150.00)
	Allowable Severance			·		\$	19,130.00
Tin 2)	nes Percentage (enter "1" in the appropria Voluntary - 25% OR Mandatory - 5%	ite area)	Company of the control	0% 5%			
3)	Years of Service Times Yearly Percentage (See below)	are property of		10%			
4)	Efforts in seeking other employment Active - 25% OR			25%			
	Non-active - 5%			0%			
	Total Percentage			40%			
Calo	c. Severance Pay (Allowable Severance t	imes Percenta	age)		-	\$	7,652.00
	TOTAL SEVERA	NCE AMO	UNT		-	\$	7,652.00
					_		

	Years of		· <u>-</u>
	Experience		Percentage
0	to	5	10%
6	to	10	20%
11	to	15	30%
16	to	20	40%
21	to	25	50%

Other Justification for Reduction:

^{*} MBA - Maximum Benefit Allowance

Application for Severance Allowance 70 O.S. 8 7-203(b)(3) PLEASE FILL OUT AND SUBMITTHIS FORM WITH ALL APPROPRIATE DOCUMENTATION TO THE RINANCE DIVISION OF THE
STATE DEPARTMENT OF EDUCATION BY SEPTEMBER 1 OF THE PISCAL YEAR IMMEDIATELY FOLLOWING THE FISCAL YEAR IN WHICH THE ANNEXATION OR CONSOLIDATION OCCURBU.
Date: 8-31-2011: Phone: Phone: Teacher Number: 40 3552
Full Legal Name: Deana Manie Bias Spoint Spourity Number,
Addross; State Zip Code
1. Employment! A: Employer: Beynton-Moton Rubic School Position: Pre-K KG Teacher B. How long have you held this poblition? I year Full-time or part-time? Full-time. C: What was your base salary for the past year, exclusive of fringe benefits? 31, 1000 (Please libelate a copy of your signed beaching contract evidencing your salary agreement) D. Date district was annexed or consolidated: I - 2011 Voluntary or mandatory? Mandatory E. Were you a working employee of the district on the date listed above? Yes If no please expinin; F. If you were a teacher, were you enteer or probationary? Conser. O. Did you apply for a job with the annexing/receiving district(s)? Nes Were you offered employment?
MO (Plous provide decumentation from the district(s) of your offer or denial) H. If yos, did you accept the position and on what date will you begin work?
1. If no, have you applied for employment with other districts in your area?
(Please provide documentation of your efforts to seek employment) **Mailed with letter of request for severance pay.
The State of the Control of the Cont
A. Have you applied for unemployment benefits? Nes. If you were you granted unemployment? Nes. B. When did you apply? 5-23-1/ When did you or will you begin receiving benefits? 6-35-// C. How much do you resplya in monthly unemployment benefits? 1364. Please include documentation)
D. Have you applied for or pro you receiving any other form of employment hasistance (i.e. Rethemont,
Workers Compensation)? NO What kind? NA B. On what date did you begin receiving or will you begin receiving benefits? NA
"P. How much will you be recolving in monthly benefits? N.A. (Please include documentation)
G. Did you apply for severance pay from the annexing receiving district(s)? MO. When? NA. Were
you approved? MA (Please Include documentation of your request and if denied, a copy of your denial)
H, if approved, how much are you receiving in severance allowance? NA (Please include
dooumentation)
G - Anneying districts were not responsible for severance

Full	l Legal Name:	Johnny L. Gamble				Date: _		9/1/2011
Pre		ry (exclusive of fringe b	enefits):					
	Base Salary			\$	39,700.00			
	Times 80%			\$	31,760.00		٨	44 FC0 00
		Maximum Severance					\$	31,760.00
						No. of		
Loca	: Waakly/Montl	ily Income or Benefits:				Pay Periods		
1)	Unemploymen	_		\$	7,400.00	x * MBA	\$	(7,400.00)
1)	Teacher Retire		`	Ψ	7,100.00	xx	\$	(,,
	Workers Com					x	\$	-
	Other employs	•		•		x	\$	==
	ound displays					-		
		Allowable Severance					\$	24,360.00
Tim	es Percentage	(enter "1" in the appropri	ate area)					
2)	Voluntary - 25				0%			
	Mandatory - 5	%	1		5%			
3)	Years of Service	ce	3					
<i>J</i>)		Percentage (See below)		•	10%			
4)	Efforts in seek	ing other employment						
.,	Active - 25%	ing other employment	1		25%			
	OR			1				
	Non-active - 5	%			0%			
		Total Percentage		<u> </u>	40%			
Calc	. Severance Pay	y (Allowable Severance	times Percenta	ige)			\$	9,744.00
Cuit	•	•		_	•	!		
		TOTAL SEVERA	NCE AMO	UNT	·	;	\$	9,744.00
		Years of						
		Experience		P	ercentage			
	0	to	5		10%			
	6	to	10		20%			
	11	to	15		30%			
	16	to	20		40%			
	21	to	25		50%			

Other Justification for Reduction:

^{*} MBA - Maximum Benefit Allowance



Application for Severance Allowance 70 O.S. § 7-203(b)(3) PLEASE FILL OUT AND SUBMIT THIS FORM WITH ALL APPROPRIATE DOCUMENTATION TO THE FINANCE DIVISION OF THE STATE DEPARTMENT OF EDUCATION BY SEPTEMBER I OF THE FISCAL YEAR IMMEDIATELY FOLLOWING THE FISCAL YEAR IN WHICH THE ANNEXATION OR CONSOLIDATION OCCURED Date: 8-30-2011 Phone: (Teacher Number: 10/160 Full Legal Name: JOHNNY L. GAMBLE, SR Social Security Number: State: Zp Code; 1. Employment: A. Employer: BOYNTON-MOTON-Pub. Sch. Position: School Teacher B. How long have you held this position? 3 475. Full-time or part-time? 7-411-71111 C. What was your base salary for the past year, exclusive of fringe benefits? 39,700 (Please include a copy of your signed teaching contract evidencing your salary agreement) D. Date district was annexed or consolidated: 1061-201(Voluntary or mandatory? MANDA TORY Were you a working employee of the district on the date listed above? If no, please explain: F. If you were a teacher, were you career or probationary? Probationary? G. Did you apply for a job with the annexing/receiving district(s)? (Please provide documentation from the district(s) of your offer or denial) H. If yes, did you accept the position and on what date will you begin work? I. If no, have you applied for employment with other districts in your area? __ If yes, where? Muskenge, Haskell, Wagoner, 7.f. 95. (Please provide documentation of your efforts to seek employment Benefits: Have you applied for unemployment benefits? Yes If yes, were you granted unemployment? Yes When did you apply? June 2011 When did you or will you begin receiving benefits? July C. How much do you receive in monthly unemployment benefits? (Please include documentation) D. Have you applied for or are you receiving any other form of employment assistance (i.e. Retirement, Workers Compensation)? ____ What kind? E. On what date did you begin receiving or will you begin receiving benefits? F. How much will you be receiving in monthly benefits? / 1/4-(Please include documentation) G. Did you apply for severance pay from the annexing/receiving district(s)? When? NA you approved? MO (Please include documentation of your request and if denied, a copy of your denial) H. If approved, how much are you receiving in severance allowance? (Please include documentation) applied to Dr Janet Barresi Twice time was august 20, 2011 by

Full	Legal Name:	Frances Lou Joh	nson				Date: _		9/1/2011
Prev		ry (exclusive of f	ringe bend	efits):	Φ.	7 500 00			
	Base Salary				\$	7,500.00			
	Times 80%	Maximum Seve	rance		\$	6,000.00		\$	6,000.00
			•				No. of		
Logo	. Wooldy/Monf	hly Income or Be	nefite				Pay Periods		
1)	Unemploymen	-	Hellts.				x * MBA	\$	-
1)	Teacher Retire			•	\$	1,688.00	x 2	-	(3,376.00)
	Workers Com				<u> </u>		х	\$	•
	Other employs	_		•			х	\$	-
	Othor omproji			1					
		Allowable Seven	ance					\$	2,624.00
Tim	es Percentage	(enter "1" in the a	ppropriate	area)					
2)	Voluntary - 2.	5%		,		0%			
	Mandatory - 5	5%		1		5%			·
3)	Years of Servi	ice		7					
•	Times Yearly	Percentage (See b	elow)			20%			
4)	Efforts in seek	ring other employ	ment						
	Active - 25%			1		25%			
	OR .					oa			
	Non-active - 3	5%				0%			
		Total Percentage		•		50%			
Calc	. Severance Pa	y (Allowable Sev	erance tir	nes Percenta	ige)			\$	1,312.00
		TOTAL SEV						\$	1,312.00
		TOTAL SE	V LLKAIN	CE AMO	UIVI			Ψ	1,012100
	-	Years of							
		Experienc	e		Pe	rcentage			
	0			5		10%			
	6	to		10		20%			
	11	to		15		30%			
	16	to		20		40%			
	21	to		25		50%			

Other Justification for Reduction:

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Application for Severance Allowance 70 O.S. § 7-203(b)(3)
PLEASE FILL OUT AND SUBMIT THIS FORM WITH ALL APPROPRIATE DOCUMENTATION TO THE FINANCE DIVISION OF THE STATE DEPARTMENT OF EDUCATION BY SEPTEMBER I OF THE FISCAL YEAR IMMEDIATELY FOLLOWING THE FISCAL YEAR IN WHICH THE ANNEXATION OR CONSOLIDATION OCCURED

ب Date: ہے	73/3/// Phone: The Phone: Teacher Number: C6 C6 70
Full Le	gal Name: Frances Lou Johnson Social Security Number:
Addres	s: City: H. G. D. State: Elip Code: Office.
1.	Employment:
A.	Employer: Bayaton Moton Public Schoolin: Librarian
В.	How long have you held this position? Full-time or part-time?
C.	What was your base salary for the past year, exclusive of fringe benefits? 47500
	(Please include a copy of your signed teaching contract evidencing your salary agreement)
D.	Date district was annexed or consolidated: June 1,2011 Voluntary or mandatory? Mandatory
E.	Were you a working employee of the district on the date listed above? Yes If no, please
	explain:
F.	If you were a teacher, were you career or probationary?
G.	Did you apply for a job with the annexing/receiving district(s)? \(\frac{\frac{1}{25}}{25} \) Were you offered employment?
	//b (Please provide documentation from the district(s) of your offer or denial)
Н.	If yes, did you accept the position and on what date will you begin work?
ĩ.	If no, have you applied for employment with other districts in your area?
	If yes, where?
	(Please provide documentation of your efforts to seek employment)
2.	Benefits:
A.	Have you applied for unemployment benefits? $\frac{\sqrt{\dot{c}}}{\sqrt{\dot{c}}}$ If yes, were you granted unemployment?
В.	When did you apply? When did you or will you begin receiving benefits?
C.	How much do you receive in monthly unemployment benefits? (Please include documentation)
. D.	Have you applied for or are you receiving any other form of employment assistance (i.e. Retirement,
	Workers Compensation)? Ves What kind? Retirement
E.	On what date did you begin receiving or will you begin receiving benefits? <u>June</u> 1993 How much will you be receiving in monthly benefits? (Please include documentation)
F.	How much will you be receiving in monthly benefits?
G.	Did you apply for severance pay from the annexing/receiving district(s)? Mo When? Were
	you approved? (Please include documentation of your request and if denied, a copy of your denial)
; H.	If approved, how much are you receiving in severance allowance?(Please include
:	documentation)

Full !	Legal Name:	James Michael Johnson				_ Date: _		9/1/2011
Prev	ious Base Salar Base Salary Times 80%	ry (exclusive of fringe bei Maximum Severance	iefits):	\$	7,500.00 6,000.00		\$	6,000.00
Less 1)	Weekly/Month Unemploymen Teacher Retire Workers Comp Other employm	ment pensation		\$	1,765.00	No. of Pay Periods X *MBA X 2 X		(3,530.00)
		Allowable Severance					\$	2,470.00
Time 2)	es Percentage of Voluntary - 25 OR Mandatory - 5		e area)1		0% 5%			
3)	Years of Servi Times Yearly	ce Percentage (See below)	3	•	10%		•	
4)	Active - 25% OR	ing other employment	1		25% 0%			
	Non-active - 5	%						
		Total Percentage			40%			•
Calc	. Severance Pa	y (Allowable Severance t	imes Percent	age)			\$	988.00
		TOTAL SEVERA					\$	988.00
	0	Years of Experience to	5	 	rcentage			
	6		10	+	20%			

		Years of		
		Experience		Percentage
	0	to	5	10%
	6	to	10	20%
	11	to	15	30%
ļ	16	to	20	40%
	21	to	25	50%

Other Justification for Reduction:

^{*} MBA - Maximum Benefit Allowance

Application for Severance Allowance 70 O.S. § 7-203(b)(3)
PLEASE FILL OUT AND SUBMIT THIS FORM WITH ALL APPROPRIATE DOCUMENTATION TO THE FINANCE DIVISION OF THE STATE DEPARTMENT OF EDUCATION BY SEPTEMBER 1 OF THE FISCAL YEAR IMMEDIATELY FOLLOWING THE FISCAL YEAR IN WHICH THE ANNEXATION OR CONSOLIDATION OCCURED

Date: _	8-31-11 Phone: Teacher Number: 06.35.30
Full Le	gal Name: James Michael Johns Social Security Number: 44 42 46
Address	State: St
1.	Employment: Schools
A.	Employer: Boyoton Motor Position: Cocuse los
B.	How long have you held this position? Helpas Full-time or part-time? Part-time?
C.	What was your base salary for the past year, exclusive of fringe benefits?
	(Please include a copy of your signed teaching contract evidencing your salary agreement)
D.	Date district was annexed or consolidated Leve 20/ Voluntary or mandatory? MA 10 dA/07
E.	Were you a working employee of the district on the date listed above? If no, please
	explain:
F.	If you were a teacher, were you career or probationary? A n Q e n
G.	Did you apply for a job with the annexing/receiving district(s)? Were you offered employment?
	(Please provide documentation from the district(s) of your offer or denial)
Н.	If yes, did you accept the position and on what date will you begin work?
I.	If no, have you applied for employment with other districts in your area? MO - MO OPOINT
	If yes, where?
	(Please provide documentation of your efforts to seek employment)
2.	Benefits:
A.	Have you applied for unemployment benefits? If yes, were you granted unemployment?
В.	When did you apply? When did you or will you begin receiving benefits?
C.	How much do you receive in monthly unemployment benefits? (Please include documentation)
D.	Have you applied for or are you receiving any other form of employment assistance (i.e. Retirement,
	Workers Compensation)? What kind? Neteroworth to a chel
E.	On what date did you begin receiving or will you begin receiving benefits?
F.	How much will you be receiving in monthly benefits? 17055 (Please include documentation)
G.	Did you apply for severance pay from the annexing/receiving district(s)? MO When? Were
	you approved? (Please include documentation of your request and if denied, a copy of your denial)
H.	If approved, how much are you receiving in severance allowance? MD MQ (Please include
	documentation)

Full	Legal Name:	Mildred Viv Jo	ones				Date: _		9/1/2011
Prev	vious Base Sala Base Salary Times 80%	ry (exclusive of Maximum Sev			\$	38,850.00. 31,080.00		\$	31,080.00
Less 1)	s Weekly/Mont Unemploymer Teacher Retire Workers Com Other employe	ement pensation	Senefits:	To complete the second	.\$	7,400.00	No. of Pay Periods X * MBA X X X	\$ \$ \$	(7,400.00) - - -
		Allowable Seve	erance					\$	23,680.00
Tim 2)	es Percentage Voluntary - 2 OR Mandatory - 5		appropriate	area)		0% 5%			
3)	Years of Servi Times Yearly	ce Percentage (See	below)	13		30%			
4)	Efforts in seek Active - 25% OR	ing other emplo	yment	<u> </u>		25%			
	Non-active - :	5%				0%			
		Total Percentag				60%			14 200 00
Calc	. Severance Pa	y (Allowable Se						\$	14,208.00
		TOTAL SE	VERAN	CE AMO	UNT			\$	14,208.00
	0 6 11 16	to to	ce))	5 10 15 20	Per	10% 20% 30% 40%			
	21	to)	25		50%			

Other Justification for Reduction:

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^{*} MBA - Maximum Benefit Allowance

STATE DEPARTMENT OF EDUCATION BY SEPTEMBER 1 OF THE FISCAL YEAR IMMEDIATELY FOLLOWING THE FISCAL YEAR IN WHICH THE ANNEXATION OR CONSOLIDATION OCCURED Teacher Number: ONCS Social Security Number: Address: **Employment:** Employer: 1 CFull-time or part-time? What was your base salary for the past year, exclusive of fringe benefits? (Please include a copy of your signed teaching contract avidencing your salary agreement) D. Date district was annexed or consolidated: 5/26/2011 Voluntary or mandatory? Mandatory? E. Were you a working employee of the district on the date listed above? F. If you were a teacher, were you career or probationary? G. Did you apply for a job with the annexing/receiving district(s)? Yes Were you offered employment? (Please provide documentation from the district(s) of your offer or denial) H. If yes, did you accept the position and on what date will you begin work? If no, have you applied for employment with other districts in your area? If yes, where? ______KOOCC = (Please provide documentation of your efforts to seek employment) Benefits: 2. A. Have you applied for unemployment benefits? Ves If yes, were you granted unemployment? Ves When did you apply? 5/23/201 When did you or will you begin receiving benefits? 6/2011 How much do you receive in monthly unemployment benefits? [388, (Please include documentation) Have you applied for or are you receiving any other form of employment assistance (i.e. Retirement, Workers Compensation)? What kind? NODCOn what date did you begin receiving or will you begin receiving benefits? How much will you be receiving in monthly benefits? (Please include documentation) G. Did you apply for severance pay from the annexing/receiving district(s)? <u>No</u> When? <u>None</u> Were you approved? MO (Please include documentation of your request and if denied, a copy of your denial) H. If approved, how much are you receiving in severance allowance? Mone

Application for Severance Allowance 70 O.S. § 7-203(b)(3) PLEASE FILL OUT AND SUBMIT THIS FORM WITH ALL APPROPRIATE DOCUMENTATION TO THE FINANCE DIVISION OF THE

documentation)

Full	Legal Name:	Veneta L. Ray				Date: _	 9/1/2011
Pre	vious Base Sala	ry (exclusive of fringe ber	nefits):				
	Base Salary	-, (ŕ	\$	55,000.00		
	Times 80%		-	\$	44,000.00		
	111100 00 .0	Maximum Severance					\$ 44,000.00
						No. of Pay	
Lage	. Wookly/Monf	hly Income or Benefits:				Periods	
1)	Unemploymen	•		\$	7,400.00	x * MBA	\$ (7,400.00)
1)	Teacher Retire		-			х	\$ -
	Workers Com		-			х	\$ ·•
	Other employs	~	-			х	\$
			•				
		Allowable Severance					\$ 36,600.00
		a name a					
		(enter "1" in the appropriat	e area)		0%		
2)	Voluntary - 2	5%			070		
	OR	T M	1		5%		
	Mandatory - 3)%			570		
3)	Years of Servi	ce	1				
υ,		Percentage (See below)			10%		
	Í					•	
4)	Efforts in seek	ing other employment					
	Active - 25%		1		25%		
	OR			•			
	Non-active - 3	5%			0%		
		•			4000	•	
		Total Percentage			40%		
Calo	c. Severance Pa	y (Allowable Severance t	imes Percenta	ige)			\$ 14,640.00
		TOTAL SEVERA			1		\$ 14,640.00
		TOTALISEVERM	(CE IIIIC	OIVA			
		Years of					
		Experience		Pe	ercentage		
	0		5		10%		
	6	to	10		20%		
	11	to	15		30%		
	16	to	20		40%		

to

21

Other Justification for Reduction:

^{*} MBA - Maximum Benefit Allowance

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PLEASE FILL OUT AND SUBMIT THIS FORM WITH ALL APPROPRIATE DOCUMENTATION TO THE FINANCE DIVISION OF THE STATE DEPARTMENT OF EDUCATION BY SEPTEMBER 1 OF THE FISCAL YEAR IMMEDIATELY FOLLOWING THE FISCAL YEAR IN WHICH THE ANNEXATION OR CONSOLIDATION OCCURED Date: 8-30-11 Phone: Teacher Number: 20/132 Pull Logal Name: Veneta (Neta Social Sccurity Number: Address: Employment; Employer: Bounton-Moton Rublic Schoolosition: Principal B. How long have you held this position? I year Full-time or part-time? Full-time C. What was your base salary for the past year, exclusive of fringe benefits? 55,000 (Please include a copy of your signed teaching contract evidencing your salary agreement) D. Date district was annexed or consolidated: 7-1-11 Voluntary or mandatory? manda E. Were you a working employee of the district on the date listed above? <u>ves</u> If no, please F. If you were a teacher, were you career or probationary? G. Did you apply for a job with the annexing/receiving district(s)? Ves Were you offered employment?

No (Please provide documentation from the district(s) of your offer or denial) Sent with H. If yes, did you accept the position and on what date will you begin work? If no, have you applied for employment with other districts in your area? Ves If yos, where? documentation sent with initial request (Please provide documentation of your efforts to seek employment) 2. Benefits: A. Have you applied for unemployment benefits? 15 If yes, were you granted unemployment? 45 B. When did you apply? When did you or will you begin receiving benefits? 6 12-11 358."
C. How much do you receive in monthly unemployment benefits? 1432 (Please include documentation) 20.4 6005 D. Have you applied for or are you receiving any other form of employment assistance (i.e. Retirement, Workers Compensation)? $\mathcal{N}_{\mathcal{O}}$ What kind? E. On what date did you begin receiving or will you begin receiving benefits? How much will you be receiving in monthly benefits? _____ (Please include documentation) G. Did you apply for severance pay from the annexing/receiving district(s)? _____ When? _____ Were you approved? MO (Please include documentation of your request and if denied, a copy of your denial) H. If approved, how much are you receiving in severance allowance? ______(Please include

documentation)

Application for Severance Allowance 70 O.S. § 7-203(b)(3)

44,000.

Ful	II Legal Name:	Martha E. Sellers				Date: _		9/1/2011
Pre	evious Base Sala Base Salary Times 80%	ry (exclusive of fringe be	enefits):	<u> </u>	32,880.00g 26,304.00			
		Maximum Severance			•		\$	26,304.00
Les	s Weekly/Montl Unemploymen Teacher Retire Workers Comp Other employr	ment pensation		\$:	1,048.42	No. of Pay Periods x *MBA x 2 x x	\$ \$ \$ \$	- (2,096.84) - -
		Allowable Severance					\$	24,207.16
Tim 2)	Voluntary - 25	enter "1" in the appropria	te area)		0%			
	OR Mandatory - 5	%		į	5%			
3)	Years of Service Times Yearly I	ce Percentage (See below)		•	10%			·
4)	Efforts in seeki Active - 25% OR	ing other employment			25%			
	Non-active - 5	%			0%			
		Total Percentage			40%			
Calc	. Severance Pay	/ (Allowable Severance t	imes Percenta	ige)			\$	9,683.00
		TOTAL SEVERA	NCE AMO	UNT	•	;	\$	9,683.00
		Years of Experience		Pe	ercentage			
	0	to	. 5	^	10%			
	6	to	10		20%			•
	11	to	15		30%			
	16 21	to	20 25		40% 50%			
		to			3070			

Other Justification for Reduction:

^{*} MBA - Maximum Benefit Allowance

Application for Severance Allowance 70 O.S. § 7-203(b)(3)

PLEASE FILL OUT AND SUBMIT THIS FORM WITH ALL APPROPRIATE DOCUMENTATION TO THE FINANCE DIVISION OF THE STATE DEPARTMENT OF EDUÇATION BY SEPTEMBER I OF THE FISCAL YEAR IMMEDIATELY FOLLOWING THE FISCAL YEAR IN WHICH THE ANNEXATION OR CONSOLIDATION OCCURED

Date:	8/31/2011 Phone: 16/16/16/16 Phone: Teacher Number: 076034	
Full L	egal Name: Martha E. Sellers Social Security Number:	
Addre	ss: 19 W. Forest 19 City: City: City: State: Kip Code: 41432	
1.		
Α	Employer: Boynton-Moton Position: Teacher	
В	How long have you held this position? Full-time or part-time? <u>Full-lime</u>	
C	What was your base salary for the past year, exclusive of fringe benefits? # 32,880.00	
	(Please include a copy of your signed teaching contract evidencing your salary agreement)	
D	Date district was annexed or consolidated:	
E.		
	explain: Reading Teacher	
F.		
G	Did you apply for a job with the annexing/receiving district(s)?	
	(Please provide documentation from the district(s) of your offer or denial)	
H		
I.	If no, have you applied for employment with other districts in your area? <u>VCS</u>	
	If yes, where? Stidham School, Crowder Public Schools, Midway Public Schools, Haskell Schools Chools, Midway Public Schools, Haskell Schools (Please provide documentation of your efforts to seek employment), (Attached) In a phore Conversation with Vivian Baber 8/31/201, she had received the documents of efforts to seek employment.	5. e
2.	Bellents:	
Α.	• • • • • • • • • • • • • • • • • • • •	
В.		
C.	How much do you receive in monthly unemployment benefits? (Please include documentation)	
Đ.	Have you applied for or are you receiving any other form of employment assistance (i.e. Retirement, Workers Compensation)? Yes What kind? Oklahoma leacher Retirement	
E.	On what date did you begin receiving or will you begin receiving benefits? 8/1/2007	
F.	How much will you be receiving in monthly benefits? 1048.42 (Please include documentation)	
≯ G.	The state of the s	
	you approved? (Please include documentation of your request and if denied, a copy of your denial)	
H,	If approved, how much are you receiving in severance allowance?(Please include	
*	According to Dr. Landon Berry, the Amexing districts	
•	were not responsible for severance pay for Boynton-	
	According to Dr. Landon Berry, the Annexing districts were not responsible for severance pay for Boynton-Moton Staff. Dr. Berry was told by SDE legal	
	Counsel.	

Full	Legal Name:	Lynwood Wade	ring the state of		Date:		9/1/2011
Prev	rious Base Sala Base Salary Times 80%	ry (exclusive of frin Maximum Severan		\$\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\		\$	25,880.00
Less 1)	Weekly/Montl Unemploymen Teacher Retire Workers Comp Other employm	ment pensation	ĭts:	\$ 7,400.00	No. of Pay Periods X * MBA X X	\$ \$. \$ \$	(7,400.00)
		Allowable Severan	ce			\$	18,480.00
3)	Voluntary - 25 OR Mandatory - 5 Years of Service Times Yearly I	% Percentage (See belowing other employmen	<u></u>				
		Total Percentage		40%			
Calc.	. Severance Pa	y (Allowable Severa TOTAL SEVE			=	\$ \$	7,392.00
and the second s	0 6 11 · 16 21	Years of Experience to to to to to	5 10 15 20 25	Percentage 10% 20% 30% 40% 50%			

Other Justification for Reduction:

^{*} MBA - Maximum Benefit Allowance

PLEASE STAT	Application for Severance Allowance 70 O.S. § 7-203(b)(3) FILL OUT AND SUBMIT THIS FORM WITH ALL APPROPRIATE DOCUMENTATION TO THE FINANCE DIVISION OF THE EDEPARTMENT OF EDUCATION BY SEPTEMBER 1 OF THE FISCAL YEAR IMMEDIATELY FOLLOWING THE FISCAL YEAR IN WHICH THE ANNEXATION OR CONSOLIDATION OCCURED
Date: 2	8-3/-// Phone: (4464 04/5 reacher Number: 304/30
Full Le	gal Name: 11/10/00/10/10/10/10/10/00/Social Security Number: 1997/00/10/00/00/00/00/00/00/00/00/00/00/00/
Address	s: 11/2 38/10 DE City's ARV 11 How State: A Zip Code: 4/1/2
1.	Employment: Employer: Bully 100 - Motor Schools Position: P.E. Teacher Gemputer Head Boys
A.	
в.	How long have you held this position? 3/15 Full-time or part-time? Tull fine Coach
Ç.	What was your base salary for the past year, exclusive of fringe benefits? \$\\\\32\\\350\\\\\\\\\\\\\\\\\\\\\\\\\\\\
	(Please include a copy of your signed teaching contract evidencing your salary agreement)
D.	Date district was annexed or consolidated: 7-/-// Voluntary or mandatory? Managery
E.	were you a working employee of the district on the date listed above? <u>NO</u> If no, please explain: The UPAN WAS OVEN.
q	If you were a teacher, were you career or probationary?
G.	Did you apply for a job with the annexing/receiving district(s)? L/ES Were you offered employment?
	(Please provide documentation from the district(s) of your offer or denial)
	If yes, did you accept the position and on what date will you begin work?
ľ.	If no, have you applied for employment with other districts in your area?
	If yes, where? IT IT SKOGPE, POVTEY, IUISA, ("noutea, Broken "1"
	If yes, where? Muskogee, forter, Tulsa, Choutea, Broken Hrvo (Please provide documentation of your efforts to seek employment) T.C.C.
2.	(Please provide documentation of your efforts to seek employment) /. C. C.
	(Please provide documentation of your efforts to seek employment) /. C. C. Benefits:
Α.	Please provide documentation of your efforts to seek employment) Benefits: Have you applied for unemployment benefits? LES If yes, were you granted unemployment?
А. В.	Please provide documentation of your efforts to seek employment) Benefits: Have you applied for unemployment benefits? When did you apply? Description Descriptio
A. B. C.	Please provide documentation of your efforts to seek employment) Benefits: Have you applied for unemployment benefits? When did you apply? Description Descriptio
A. B. C.	Benefits: Have you applied for unemployment benefits? US If yes, were you granted unemployment? US When did you apply? 5/22/// When did you or will you begin receiving benefits? (Please include documentation) 1/400 Have you applied for or are you receiving any other form of employment assistance (i.e. Retirement,
A. B. C. D.	Benefits: Have you applied for unemployment benefits? When did you apply? When did you or will you begin receiving benefits? When did you receive in monthly unemployment benefits? (Please include documentation) (Please you applied for or are you receiving any other form of employment assistance (i.e. Retirement, Workers Compensation)? MD What kind? M/4 M/4
A. B. C. D.	Benefits: Have you applied for unemployment benefits?
A. B. C. D.	Benefits: Have you applied for unemployment benefits?
A. B. C. D.	Benefits: Have you applied for unemployment benefits?
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A. B. C. D.	Benefits: Have you applied for unemployment benefits? When did you apply? When did you apply? When did you or will you begin receiving benefits? When did you applied for or are you receiving any other form of employment assistance (i.e. Retirement, Workers Compensation)? What kind? What kind? What date did you begin receiving or will you begin receiving benefits? What workers Compensation or will you begin receiving benefits? What workers Compensation or will you begin receiving benefits? What workers Compensation or will you begin receiving benefits? What workers compensation or will you begin receiving benefits? What workers compensation or will you begin receiving benefits? What workers compensation or will you begin receiving benefits? What workers compensation or will you begin receiving district(s)? What workers compensation or will you begin receiving district(s)? What workers compensation of your sequest and if denied, a copy of your denial) What workers compensation of your request and if denied, a copy of your denial) What workers compensation of your request and if denied, a copy of your denial) What workers compensation of your request and if denied, a copy of your denial) What workers compensation of your request and if denied, a copy of your denial) What workers compensation of your request and if denied, a copy of your denial) What workers compensation of your request and if denied, a copy of your denial) What workers compensation of your request and if denied, a copy of your denial) What workers compensation of your request and if denied, a copy of your denial) What workers compensation of your request and if denied, a copy of your denial) What workers compensation of your request and if denied, a copy of your denial What workers compensation of your request and if denied, a copy of your denial What workers compensation of your request and if denied, a copy of your denial What workers compensation of your request and if denied and your pr
A. B. C. D. F. G.	Benefits: Have you applied for unemployment benefits? When did you apply? When did you or will you begin receiving benefits? When did you receive in monthly unemployment benefits? When did you applied for or are you receiving any other form of employment assistance (i.e. Retirement, Workers Compensation)? What kind? What kind? What will you begin receiving benefits? What workers Compensation? What will you begin receiving or will you begin receiving benefits? What workers Compensation? On what date did you begin receiving or will you begin receiving benefits? What workers? What workers workers include documentation? What workers? What workers workers include documentation? What workers? What workers workers include documentation? What workers workers workers include documentation? What workers workers workers workers workers workers workers workers workers workers. What workers worker
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A. B. C. D. F. G.	Benefits: Have you applied for unemployment benefits? When did you apply? When did you or will you begin receiving benefits? When did you receive in monthly unemployment benefits? When did you applied for or are you receiving any other form of employment assistance (i.e. Retirement, Workers Compensation)? What kind? What kind? What will you begin receiving benefits? What workers Compensation? What will you begin receiving or will you begin receiving benefits? What workers Compensation? On what date did you begin receiving or will you begin receiving benefits? What workers? What workers workers include documentation? What workers? What workers workers include documentation? What workers? What workers workers include documentation? What workers workers workers include documentation? What workers workers workers workers workers workers workers workers workers workers. What workers worker
A. B. C. D. F. G.	Benefits: Have you applied for unemployment benefits? When did you apply? When did you or will you begin receiving benefits? When did you receive in monthly unemployment benefits? When did you applied for or are you receiving any other form of employment assistance (i.e. Retirement, Workers Compensation)? What kind? What kind? What will you begin receiving benefits? What workers Compensation? What will you begin receiving or will you begin receiving benefits? What workers Compensation? On what date did you begin receiving or will you begin receiving benefits? What workers? What workers workers include documentation? What workers? What workers workers include documentation? What workers? What workers workers include documentation? What workers workers workers include documentation? What workers workers workers workers workers workers workers workers workers workers. What workers worker
A. B. C. D. F. G.	Benefits: Have you applied for unemployment benefits? When did you apply? When did you or will you begin receiving benefits? When did you receive in monthly unemployment benefits? When did you applied for or are you receiving any other form of employment assistance (i.e. Retirement, Workers Compensation)? What kind? What kind? What will you begin receiving benefits? What workers Compensation? What will you begin receiving or will you begin receiving benefits? What workers Compensation? On what date did you begin receiving or will you begin receiving benefits? What workers? What workers workers include documentation? What workers? What workers workers include documentation? What workers? What workers workers include documentation? What workers workers workers include documentation? What workers workers workers workers workers workers workers workers workers workers. What workers worker
A. B. C. D. F. G.	Benefits: Have you applied for unemployment benefits? When did you apply? When did you apply? When did you or will you begin receiving benefits? When did you applied for or are you receiving any other form of employment assistance (i.e. Retirement, Workers Compensation)? What kind? What kind? What date did you begin receiving or will you begin receiving benefits? What workers Compensation or will you begin receiving benefits? What workers Compensation or will you begin receiving benefits? What workers Compensation or will you begin receiving benefits? What workers compensation or will you begin receiving benefits? What workers compensation or will you begin receiving benefits? What workers compensation or will you begin receiving benefits? What workers compensation or will you begin receiving district(s)? What workers compensation or will you begin receiving district(s)? What workers compensation of your sequest and if denied, a copy of your denial) What workers compensation of your request and if denied, a copy of your denial) What workers compensation of your request and if denied, a copy of your denial) What workers compensation of your request and if denied, a copy of your denial) What workers compensation of your request and if denied, a copy of your denial) What workers compensation of your request and if denied, a copy of your denial) What workers compensation of your request and if denied, a copy of your denial) What workers compensation of your request and if denied, a copy of your denial) What workers compensation of your request and if denied, a copy of your denial) What workers compensation of your request and if denied, a copy of your denial) What workers compensation of your request and if denied, a copy of your denial What workers compensation of your request and if denied, a copy of your denial What workers compensation of your request and if denied, a copy of your denial What workers compensation of your request and if denied and your pr

Full	Legal Name:	Michelle Lee Washington	<u>n</u>			_ Date: _	· - -	9/1/2011
Prev	vious Base Sala	ry (exclusive of fringe be	nefits):					
	Base Salary		_	\$	37,225.00			
	Times 80%			\$	29,780.00			
		Maximum Severance					\$	29,780.00
						No. of		
_						Pay Periods		
	•	hly Income or Benefits:		\$	7,400.00	x * MBA	¢	(7,400.00)
1)	Unemploymen		-	φ	7,400.00		, Ψ , \$	(7,400.00)
	Teacher Retire		-			x	\$	_
	Workers Com	7	-			x	\$	-
	Other employ:	ment	-			^	Ψ	
		Allowable Severance					\$	22,380.00
Tim	es Percentage	(enter "1" in the appropria	te area)					
2)	Voluntary - 2		,		0%			
	OR							
	Mandatory - 3	5%	1		5%			
3)	Years of Servi	ice	1					
,	Times Yearly	Percentage (See below)	•		10%			
4)	Efforts in seel	ring other employment						
	Active - 25%		1		25%			
	OR					÷		
	Non-active -	5%			0%			
		Total Percentage	-		40%			
Calc	. Severance Pa	y (Allowable Severance t	imes Percenta	ge)			\$	8,952.00
0		TOTAL SEVERA			1			8,952.00
		TOTAL						
		Years of						
		Experience		P	ercentage			
	C		5		10%			
	6		10		20%			
	11		15		30%			
	16	to	20		40%			

25

50%

Other Justification for Reduction:

to

21

^{*} MBA - Maximum Benefit Allowance

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PLEASE \$TA1	Application for Severance Allowance 70 O.S. § 7-203(b)(3) FILL OUT AND SUBMIT THIS FORM WITH ALL APPROPRIATE DOCUMENTATION TO THE FINANCE DIVISION OF THE TEDEPARTMENT OF EDUCATION BY SEPTEMBER 1 OF THE FISCAL YEAR IMMEDIATELY FOLLOWING THE FISCAL YEAR IN WHICH THE ANNEXATION OR CONSOLIDATION OCCURED
Date; (2)31/2011 Phone:
Full Le	gal Name: Michelle Lee Mashimton Social Security Number: 444546 1655
Addres	s: City: Carl State: Zip Code:
1.	Employment:
A.	Employer: Bounton-Moton Public Schools Position: Teacher
В,	How long have you held this position? Full-time or part-time?
C,	What was your base salary for the past year, exclusive of fringe benefits? 37,294,71
	(Please include a copy of your signed teaching contract evidencing your salary agreement)
	Date district was annexed or consolidated: ONLYLA Voluntary or mandatory? MANDATAY
E.	Were you a working employee of the district on the date listed above? <u>U.S.</u> If no, please explain:
F.	If you were a teacher, were you career or probationary? <u>COrrely</u>
G,	Did you apply for a job with the annexing/receiving district(s)? 115 Were you offered employment?
	(Please provide documentation from the district(s) of your offer or denial)
H.	
1.	If no, have you applied for employment with other districts in your area? 48
	If yes, where? <u>MUSLOOPE PUBLIC SCHOOLS</u>)
	(Please provide documentation of Your efforts to seek employment)
2.	Benefits:
Α.	Have you applied for unemployment benefits? 1185 If yes, were you granted unemployment? 188
	When did you apply? Mul 2011 When did you or will you begin receiving benefits? June 2011
Ċ,	How much do you receive in monthly unemployment benefits? 311/1998(Please include documentation) 74.5.
D.	Have you applied for or are you receiving any other form of employment assistance (i.e. Retirement,
	Workers Compensation)? NO What kind?
E.	On what date did you begin receiving or will you begin receiving benefits? 7-18-201
F.	How much will you be receiving in monthly benefits 131/Week (Please include documentation)
G,	Did you apply for severance pay from the annexing/receiving district(s)? 1125 When? AUG. Were
	you approved? (Please include documentation of your request and if denied, a copy of your denial) (Sent Aug 7)
J-I.	If approved, how much are you receiving in severance allowance? (Please include
	documentation) .

Condition should up to the interest

Ful	l Legal Name:	Shelbie Jean Williams		by year of ways		Date:	3 (14.3)	9/1/2011
Pre	vious Base Sala Base Salary Times 80%	ry (exclusive of fringe ber	nefits):	\$	90,400.00 72,320.00			·
		Maximum Severance					\$	72,320.00
Les	s Weekly/Montl Unemploymen Teacher Retire Workers Comp Other employr	ement pensation		\$	7,400.00	No. of Pay Periods X * MBA X X	\$ \$ \$ \$ \$	(7,400.00) - - -
		Allowable Severance					\$	64,920.00
Tin: 2)	Voluntary - 2:	(enter "1" in the appropriat 5%	e area)	-	0%			
	OR Mandatory - 5	5%	1	-	5%			
3).	Years of Servi Times Yearly	ce Percentage (See below)	2	•	10%			
4)	Efforts in seek Active - 25% OR	ing other employment	1	-	25%	•		
	Non-active - 5	5%	1 1 1 1 1	<u>.</u>	0%			
		Total Percentage			40%			
Calc	c, Severance Pa	y (Allowable Severance ti	mes Percent	age)			\$	25,968.00
		r issues identified in the fi			.&I **		\$	(25,967.00)
		TOTAL SEVERAM					\$	1.00

		Years of		
		Experience		Percentage
	0	to	5	10%
	6	to	10	20%
	11	to	15	30%
Ì	16	to	20	40%
	21	to	25	50%

Other Justification for Reduction:

**See Final Audit from the State Auditor and Inspector (SA&I).

^{*}MBA - Maximum Benefit Allowance

Application for Severance Allowance 70 O.S. § 7-203(b)(3)

PLEASE FILL OUT AND SUBMIT THIS FORM WITH ALL APPROPRIATE DOCUMENTATION TO THE FINANCE DIVISION OF THE STATE DEPARTMENT OF EDUCATION BY SEPTEMBER I OF THE FISCAL YEAR IMMEDIATELY FOLLOWING THE FISCAL YEAR IN WHICH THE ANNEXATION OR CONSOLIDATION OCCURED Date: August 31, 2011 Phone: Teacher Number: <u>DO2 3</u> Full Legal Name: Shelbie Jean Williams Social Security Number: Address: **Employment:** Employer: Bounton Moton Public Schoolsition: Superintendent How long have you held this position? 2 years Full-time or part-time? Full -+ 1'me. C. What was your base salary for the past year, exclusive of fringe benefits? 99,400. 90,400. (Please include a copy of your signed teaching contract evidencing your salary agreement) D. Date district was annexed or consolidated: annexed Voluntary or mandatory? mandatory? Edu E. Were you a working employee of the district on the date listed above? Ves If no, please explain: F. If you were a teacher, were you career or probationary? G. Did you apply for a job with the annexing/receiving district(s)? <u>Ves</u> Were you offered employment? Please provide documentation from the district(s) of your offer or denial) H. If yes, did you accept the position and on what date will you begin work? __no If no, have you applied for employment with other districts in your area? Ves If yes, where? <u>Haskell</u>, <u>Midway</u>, <u>Checotah</u>, <u>Butler Engineering</u>, <u>BtF Furniture</u>, (Please provide documentation of your efforts to seek employment) <u>Uremployment</u> requires We wrote Itaskell and Midway 2 searches per week requesting employment for all Benefits: employees at Boynton-Moton.

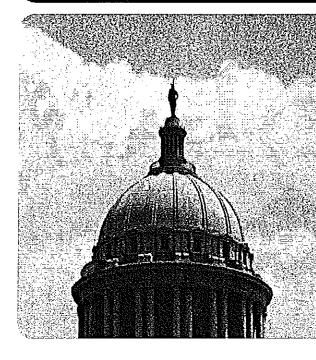
Have your applied for words. Have you applied for unemployment benefits? <u>Ves</u> If yes, were you granted unemployment? <u>Ves</u> When did you apply? July, 2611 When did you or will you begin receiving benefits? July, 2011 How much do you receive in monthly unemployment benefits? 358 (Please include documentation) Have you applied for or are you receiving any other form of employment assistance (i.e. Retirement, Workers Compensation)? ho What kind? none

On what date did you begin receiving or will you begin receiving benefits? hone E. (Please include documentation) How much will you be receiving in monthly benefits? _ none_ G. Did you apply for severance pay from the annexing/receiving district(s)? 1/0 When? _____ Were you approved? _____ (Please include documentation of your request and if denied, a copy of your denial) H, If approved, how much are you receiving in severance allowance? We were told to apply with the SDE documentation) for severance allowance.

SPECIAL AUDIT

BOYNTON-MOTON PUBLIC SCHOOL DISTRICT

January 1, 2010 through May 27, 2011



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Oblidence by recurstrics the
econolidation, and fruit entrying a

Severe wild fruits



Oklahoma State Auditor & Inspector Gary A. Jones, CPA, CFE



Oklahoma State Auditor & Inspector

2300 N. Lincoln Blvd. • State Capitol, Room 100 • Oklahoma City, OK 73105 • Phone: 405.521.3495 • Fax: 405.521.3426

December 5, 2011

Honorable Janet Barresi, Chairperson Oklahoma State Board of Education 2500 North Lincoln Blvd., Room 118 Oklahoma City, Oklahoma 73105-4599

Transmitted herewith is the Special Audit Report of the Boynton-Moton Public School District, Boynton, Oklahoma.

Pursuant to the State Superintendent of Public Instruction's request and in accordance with the requirements of 74 O.S. 2001, § 213(C), we performed a special audit with respect to the Boynton-Moton Public School District No. I-4 for the period: January 1, 2010 to present (end of fieldwork: May 27, 2011).

The objectives of our special audit primarily included, but were not limited to, the areas noted in the State Superintendent of Public Instruction's request. Our findings related to these objectives are presented in the accompanying report.

Because the above procedures do not constitute an audit conducted in accordance with generally accepted auditing standards, we do not express an opinion on the account balances or financial statements of the Boynton-Moton Public School District for the period January 1, 2010 to present (end of fieldwork: May 27, 2011).

The Office of the State Auditor and Inspector is committed to serve the public interest by providing independent oversight and by issuing reports that serve as a management tool to the State. Our goal is to serve the citizens of Oklahoma by promoting accountability and fiscal integrity in state and local government.

We wish to take this opportunity to express our appreciation for the assistance and cooperation extended to our office during the course of our special audit.

This report is addressed to and intended solely for the information and use of the Oklahoma State Department of Education and the Oklahoma State Board of Education and should not be used for any other purpose.

Sincerely,

GARY A. JONES, CPA, CFE

OKLAHOMA STATE AUDITOR & INSPECTOR

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BOARD OF EDU	CATIONii
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OBJECTIVES, FI	NDINGS and RECOMMENDATIONS3
	OBJECTIVES
OBJECTIVE I:	Determine the estimated liabilities, revenue, and cash on hand for the year ended June 30, 20113
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BOARD OF EDUCATION AS OF MAY 31, 2011

Hubert Adkins	President
June Lee	Clerk
Robert Lang	Member
Angela Jackson	Member
Yolanda Wiggins	Member
Leonard Walker	Member

Superintendent

Dr. Shelbie Williams

Introduction

The Boynton-Moton Public School District (I-4) is part of the Oklahoma State System of Public Education, as described in 70 O.S. § 1-101 et seq., the Oklahoma School Code.

The Board of Education ("Board") of the Boynton-Moton Public School District ("District") is responsible for the supervision, management, and control of the District as provided for in 70 O.S. § 5-117.

Both the Board and the District are subject to the provisions of the Oklahoma School Code, as well as other statutes found in various titles including, but not limited to, Title 25 (Definitions and General Provisions), Title 51 (Officers), Title 61 (Public Buildings and Public Works), Title 62 (Public Finance), and Title 68 (Revenue and Taxation).

The District is audited annually by private independent auditors. However, the FY10 and FY11 audits have not been done and consequently those audit reports were not available for review, as noted in this report.

The Office of the State Auditor and Inspector conducted a special audit of the records of the District, primarily those records relating to outstanding liabilities and payroll contracts.

All dollar amounts included in the report are rounded to the nearest dollar, unless otherwise specified.

The District's fiscal year starts July 1 and ends June 30. In this report, fiscal years are abbreviated by using the ending calendar year. For example, the fiscal year of July 1, 2010 to June 30, 2011, will be identified as "FY11."

The results of the State Board of Education's special audit request are in the following report.

Background

Dr. Shelbie Williams was hired September 8, 2009, as the Superintendent for the District. She continued to serve as the District's Superintendent until the school was closed, as of June 30, 2011.

The District's student enrollment and school revenues had been declining rapidly. Between July 1, 2008 and closing at June 30, 2011, both student enrollment and estimated revenues had decreased by approximately 49%.

During their August and September 2010 Board meetings, the District's Board acknowledged the need to transfer all high school students out of the District. The Board did not officially vote to close the high school, but the high school was effectively closed with the transfer of the students. The kindergarten through 8th grade school remained open for the balance of the school year.

On March 17, 2011, Janet Barresi, State Superintendent of Public Instruction, sent a letter to the District, addressed to District Superintendent Dr. Shelbie Williams. The letter informed Dr. Williams that the District would no longer be accredited for the following school year ending June 30, 2012 (FY12).

On March 23, 2011, Janet Barresi, State Superintendent, formally requested an investigative audit of the District be performed by the State Auditor and Inspector's Office.

On March 24, 2011, the Oklahoma State Board of Education voted to close the District and annex the District to the surrounding school districts.

Following that decision, officials from the State Department of Education were instructed to secure all records of the District schools. Copies were made and retained at the State Department of Education office in Oklahoma City, OK. The original records were returned to the school.

OBJECTIVE I Determine the estimated liabilities, revenue, and eash on hand for the year ended June 30, 2014.

Procedures

The primary objective for this engagement was to determine the outstanding liabilities of the District at the end of the FY11 school year and the amount of cash and investment assets the District had available to pay its final bills and liabilities. In order to accomplish this objective, we reviewed the District's accounts payable and payroll records and estimated the District's remaining liabilities. We then estimated revenue to be collected and confirmed the cash held in the District's bank account, less any outstanding checks at the time of fieldwork.

Findings

Estimated Current Liabilities:

The estimated liabilities of the District for the close of FY11 are as follows, by category:

Vendors — We reviewed the vendor files which contained vendor invoices, statements, notices to pay, and miscellaneous communications with the District, as maintained at the Boynton-Moton School. We compiled a list, per vendor, of the most recent invoice/statement, any amounts paid on the invoice/statement, and any outstanding amount on the invoice/statement. We also reviewed the documentation for reasonableness and completeness.

In order to determine if the listing of vendors was complete we made inquiries of District administrators. We also examined a listing of all vendors paid throughout the fiscal year, as provided by the District's Treasurer, to determine if any frequently paid vendors were missing from our compiled list. Finally, we reviewed the records that were obtained from the District, as noted in the background information, which were maintained at the State Department of Education in Oklahoma City, OK. Although some vendor files and invoices were noted in this documentation, nothing useful was identified to help determine the final bills and liabilities.

For each vendor listed, we inquired of District administrators if there were any transactions, service requests, or other reasons to believe additional invoices would be mailed to the school for services

performed or products received in the school year. In some instances we were able to determine the overall liability owed to a vendor by contacting them directly. In many cases we estimated, with the assistance of District administrators, any future liabilities based on the assumption the school would continue to be in operations until the end of FY11.

We estimated vendor and payroll liabilities to be \$137,496, as of the date of fieldwork.

- 2. Projected State Auditor and Inspector Fees We estimated fees for our audit engagement to be \$10,000.
- 3. Payroll As of the end of fieldwork date (May 27, 2011), the District owed employees their paychecks for the May and June 2011 payrolls. We examined the outstanding payroll information provided by District administrators to determine the amount of payroll owed to salaried employees. We then determined which hourly employees were expected to work in the months of May and June and made inquiries of District administrators to estimate the number of hours they would be working in those months to arrive at the total estimated payroll outstanding. We estimated payroll liabilities to be \$81,064.
- 4. Vacation, Sick, and Personal Accruals We inquired of the Superintendent, Principal, and Superintendent Secretary as to the nature or existence of all outstanding benefit and payroll accruals such as accrued vacation time, unused sick time, or personal days for which the school will be liable.

Employees are provided vacation, sick, and/or personal days based on their employment contracts. However, with the exception of administrators, these benefits are not accrued after year end. Teachers can accrue personal days, but their accrual is carried over to the next school district that they may be employed in, and those personal leave days will not be paid by the District.

We spoke with the remaining administrators who believed they had accrued vacation time. However, they had not kept records of the vacation time they had accrued. Furthermore, due to the fiscal decline in the school district, they all stated they would rather waive their accrued vacation, if any, so as not to appear to be taking additional money from the school. Therefore, no provision was made for vacation leave, sick leave, or personal day liabilities.

5. Payroll Taxes and Penalty – The District had not made timely deposits of payroll taxes for the period of October 2010 through March 2011, resulting in the penalties shown below:

Monthly Payroll	Became Delinquent	Paid	Amount	IRS Rate	Penalty
October	11/15/10	*	\$9,802.05	10%	\$980.21
November	12/15/10	05/03/11	\$10,082.26	10%	1,008.23
December	01/15/11	05/03/11	\$9,536.40	10%	953.64
January	02/15/11	05/03/11	\$8,920.96	10%	892.10
February	03/15/11	05/03/11	\$9,049.36	10%	904.94
March	04/15/11	05/03/11	\$8,997.25	10%	899.73
			. •		\$5,638.85
* As of fieldw	ork date 5/27/11,	the October 2	2010 payroll taxe	s were unp	paid.

We calculated the penalty imposed by the IRS on late payments based on the schedule above and the 10% IRS penalty rate on all payments 16 or more calendar days late. As shown above, we estimated payroll taxes overdue and tax penalties to be \$15,441.

6. Audit and Closing Fees — We assessed future required audit and closure fees the District may incur, as a result of the school closing. Under 70 § 22-108, a school district is required to have an annual audit and file the audit report "within ten (10) months after the close of the fiscal year..."

The District had had the same external auditor for the past several years. The external auditor notified Dr. Williams by letter dated May 6, 2011, that they would not be performing the required FY10 audit of the District, after Dr. Williams had informed them that there was no funding to pay for the engagement. The external auditor estimated the cost of a FY10 audit would be \$5,500.

The District was also required to have a closing financial audit for the FY11 school year. The external auditor believes the cost of the closing audit would not be substantially different from the FY10 estimate with the exception, of an increased filing fee of \$100. Therefore, the estimated liabilities for the un-performed audits are as follows:

	School Year	Estimated
	<u>Ended</u>	Audit Fee
Annual audit	06/30/10	\$5,500.00
Final annual audit	06/30/11	5,600.00
		\$11,100.00

We spoke with multiple employees at the State Department of Education in the divisions of accreditation, finance, and state aid who stated that they were not aware of any closing fees imposed by the State Department of Education for closing school districts. As shown above, we estimated financial audit liabilities to be \$11,100.00 for the final two fiscal years of the school district.

- 7. Child Nutrition The State Department of Education informed us of a liability in the Child Nutrition Fund. The District had been providing free lunches to individuals who did not qualify for free lunches and, as a result, the District is liable for \$17,920 owed to the state for that federal grant program.
- 8. Reserve for Unknown Given the uncertainty of outstanding obligations of the District, which may not have been noted during our engagement and the general lack of documentation, we accrued an additional \$10,000 for potential unknown liabilities or bills.

Estimated Revenues: Estimated revenues for the remainder of the school year ended June 30 were calculated using the Monthly Financial Report provided by the Treasurer for the District and determined to be \$105,569.

Cash on Hand: The total cash on hand for the District was calculated at the last day of fieldwork, according to the bank statement date of May 23, 2011. The District has one bank account with Armstrong Bank. As of May 23, 2011, the District's account had the following balance:

Account balance	\$140,802.17	
Outstanding checks	-34,171.90	
Deposits in transit	0.00	
Cash on hand	\$106,630.27	

Estimated Liabilities over Revenues and Cash on Hand: Using the totals shown above, we calculated the estimated liabilities over revenues and cash on hand for the year ended FY11, to be \$159,115 as shown in the schedule below:

Estimated	Liabilities	
1	Vendors	\$137,495.50
2	Projected State Auditor and Inspector Fees	10,000.00
3	Payroll	81,064.16
4	Vacation, Sick, and Personal Accruals	0.00
5	Payroll Taxes and Penalty Due	15,440.90
6	Financial Audit Fees for FY10 and FY11	11,100.00
7	Child Nutrition	17,920.44
8	Reserve for Unknown	10,000.00
Total Estin	nated Liabilities	283,021.00
Total Estin	nated Revenues	105,569.12
Cash on Hand at May 23, 2011		106,630.27
Less: Cash restricted for debt service		(88,293.57)
Cash on hand and estimated revenues available		123,905.82
1	Liabilities in Excess of Estimated Revenues on Hand available:	(\$159,115.18)

Title 68 § 3019, states in relevant part:

No warrant or certificate of indebtedness in any form shall be issued, approved, signed or attested, on or against any appropriation for a purpose other than that for which the said item of appropriation was made, or in excess of the amount thereof. (emphasis added)

Title 70 § 5-135 states, in relevant parts:

"D. Prior to the issuance of a purchase order, the encumbrance clerk must first determine that the encumbrance will not exceed the balance of the appropriation to be charged." (emphasis added) and

"E. Before any purchase is completed, a purchase order or encumbrance must be issued. No bill shall be paid unless it is supported by an itemized invoice clearly describing the items purchased, the quantity of each item, its unit price, its total cost and proof of receipt of such goods or services." and

"H. The treasurer shall register the warrant or check in the warrant or check register, charging the appropriation account and crediting the warrants or checks outstanding account of the designated fund. Provided, no warrant or check shall be registered in excess of the appropriation account's balance." (emphasis added)

Under Oklahoma Administrative Code section 210:25-5-1, "The superintendent, as executive officer of the board of education, furnishes the leadership for the board..." in the preparation, implementation and monitoring of the District's budget/estimate of needs. According to the oath of office at 70 § 5-116, a superintendent swears to "...faithfully discharge all of the duties pertaining to said office and obey the Constitution and laws of the United States and Oklahoma."

The final budget/estimate of needs report filed for the District indicated the FY11 "general fund" appropriations were \$866,742 and the total FY11 warrants issued were \$860,301, but it did not report any "reserves" for encumbrances.

At the end of fieldwork (May 27, 2011), the total warrants issued for the general fund stood at \$782,092. Based on the final estimate of needs, \$78,209 (\$860,301 - \$782,092) in additional bills and payroll had been paid by June 30. This report calculated estimated liabilities of \$159,115, including a reserve of \$10,000 for "unknown."

Based on the unpaid liabilities estimated for the June 30 year-end, the District appeared to have exceeded its legal appropriations by approximately \$64,500 to \$74,500 in its final year of operation.

As of May 27, 2011, the bonded indebtedness of the District stood at:

\$55,057.50
427,460.00
482,517.50
88,293.57
\$394,422.93

Subsequent Events Within days of the end of fieldwork, the "current" amounts due for bond principal and interest for FY11 were paid from the \$88,294 reserved for debt service and were not outstanding at the June 30 year-end.

> According to the annexation agreement, the two succeeding school districts agreed to split equally (50%-50%) the assets and property, "all debts, liabilities, etc., known or unknown," except that one district would "receive the Boynton-Moton School District gym and will also assume the outstanding indebtedness associated with the gym."

> Haskell Public School District agreed to be the "lead" district for administering final bills for the Boynton-Moton School District. As of December 5, 2011, information provided by the Haskell Public School District indicated that approximately \$145,000 had been paid on those final bills and liabilities, and that the IRS had filed a lien on the Boynton-Moton School District property for unpaid taxes in the amount of \$16,558.

> Based on that information, our original estimated amount of \$159,115 for potential liabilities was "low" even with a \$10,000 reserve added for "unknown." Consequently, the amount of expenditures in excess of legal appropriations would also have been more than the \$64,500 to \$74,500 we had estimated on that issue.

OBJECTIVE II. Review the salary increase of the Superintendent in the school's final year.

Background

In the midst of previous and ongoing financial difficulties and an OSAI audit report that covered the time period July 1, 2007 through December 31, 2009, Dr. Shelbie Williams was hired September 8, 2009, as District Superintendent, with an annual compensation of \$36,000 for fiscal year FY10. Dr. Williams' contract for the subsequent FY11 school year increased to \$90,400.

A 151% salary increase (including vehicle allowance) was provided to the superintendent during a time of continuing financial uncertainty concerning future state budget cuts, the struggle to pay final obligations for FY10, a decline in cash surplus, and student enrollment that had declined 49% since FY08.

Findings

Timeline and events, according to Board minutes.

In a June 14, 2010, board meeting, the Superintendent indicated that the District did not at that time have the approximate \$75,000 necessary to pay its vendors for its end of the year accounts payable for FY10.

The minute's record:

"The superintendent reported that we are working to pay bills owed to vendors but we may possibly be down around \$75,000. We will work to get in donations, grants, and federal money to pay all bills..."

Just two weeks later, on June 28, 2010, the Superintendent reported some last minute funds had been received, and all FY10 bills would be paid, but also expressed uncertainty about the expectation of an unknown amount of reduction or cuts in State Aid for FY11.

The minutes for this meeting were obtained from a Board member, since the District's original minutes were apparently missing from school records. Those minutes reflect in relevant part:

The Superintendent of Schools reported that due to receiving grants and federal funds all bills owed by Boynton-Moton Schools for 2009-10 school year should be paid. We did not exceed appropriations. Some items were over-encumbered and we were able to decrease some of the encumbrances which will help pay bills. The insurance premiums will be lower in 2010-2011 school year. Many of the expenses for next year will be lower. We are waiting on State Aid to see how much the decrease in funding will be for next school year... (emphasis added)

During the same June 28th meeting, the Superintendent was rehired for the FY11 fiscal year. The minutes did not record <u>the amount of the contract</u> that was approved at the June 28th meeting.

Approximately 2½ months after approving what turned out to be the Superintendent's \$90,400 contract, it was reported that the District's State Aid would be cut from \$408,110 to \$280,780, a \$127,330 or 31% decrease. Also, the District's American Recovery and Reinvestment Act (ARRA) federal stimulus funding would be cut from \$36,656 to \$25,904, a \$10,752 or 29% decrease.

Due to the reduction in state and ARRA funding, the District was unable to hire a full-time English teacher and a full-time math teacher, resulting in the loss of accreditation for and the closure of the high school.

The September 13, 2010, board minutes read in relevant part:

There is difficult news from the Oklahoma State Department of Education because State Aid has been cut from \$408,110.00 to \$280,780.00. The total General Fund Appropriation on the Estimate of Needs has been cut from \$921,411.38 to \$726,901.00. This cut in total funding to Boynton-Moton Public Schools of \$194,510.38. Last year Boynton-Moton spent \$1,060.000 [sic]. We have just been informed of these cuts and they are listed in the budget to be approved later in the Agenda. These cuts will mean that we will not be able to afford to hire a full-time English teacher and a full-time math teacher at the high school level. Basically this means that we will not be able to be accredited and our high school students will need to transfer to another high school. (emphasis added)

From June 14, 2010 to September 13, 2010 (91 days), the circumstances during which the Superintendent's salary and vehicle allowance was

increased from \$36,000 to \$90,400 evolved from the uncertainty of needing \$75,000 to pay the District's final FY10 obligations, to receiving last minute funding and being able to pay the FY10 outstanding bills, to approving a 151% salary increase for the Superintendent, to losing the high school due to the inability of the District to hire two teachers due to the anticipated state budget cuts and scarcity of local funding.

The records of the Board's approval of the Superintendent's contract lacked detail, at best.

The Superintendent's contract for the FY11 fiscal year is dated June 28, 2010. The meeting minutes for June 28, 2010, reflect that the Superintendent was merely hired for FY11, with no mention of a contract or a stated salary.

According to the June 28, 2010, board minutes:

Hubert made the motion to approve hiring Dr. Shelbie Williams as Superintendent of Schools for the 2010-2011 school year. Yolanda Wiggins seconded the motion. Ayes: Leonard Walker and Robert Lang.

Aside from the fact that the minutes only reflect the votes of two Board members, Leonard Walker and Robert Lang, we could not verify a *specific contract amount* that the Board had approved from the records available. Again, there was no mention of the Superintendent's "contract" or "compensation" in the minutes.

The president and clerk of the Board had signed the contract. The amounts for salary and vehicle allowance were blank lines filled in manually. The date stamp on the contract filed with the OSDE indicated a filing date of "July 14, 2010."

We attempted to make the determination as to whether there was a lack of documentation in the minutes, and the contract was approved, or whether the majority of the Board did not actually approve the contract. We contacted and interviewed the five members that were on the Board at the time the contract was executed.

The results of the interviews are summarized below:

• Rickey Lee was ill at the time of the June 28, 2010, meeting. Lee stated that the contract was brought to him for his signature while he was in the hospital.

- Hubert Adkins recalled discussing the Superintendent's salary and seeing the contract.
- Leonard Walker recalled a discussion on paying the Superintendent \$88,000, but did not recall seeing a contract. However, we did note that Walker's signature was on the contract.
- Yolanda Wiggins indicated the Board voted to rehire the Superintendent with a salary increase, but no amount was specified during the meeting. Wiggins also stated Dr. Williams' employment contract was not presented at the meeting.
- Robert Lang did not recall if the contract was presented to the Board, but did remember voting to hire the Superintendent.

According to Dr. Williams, two contracts were provided to the Board in executive session; one with a base of \$88,000 and the other was for either "\$93,000 or \$95,000." According to Williams, the Board opted for and approved the lesser contract of \$88,000, which was signed by Leonard Walker and Rickey Lee.

We asked for executive session minutes to determine if a contract was presented and discussed; however, those minutes could not be provided.

Board members' explanations for approving the 151% increase varied.

We asked the five members of the Board listed above what their reasoning was for providing a 151% increase in the Superintendent's salary at a time the District was facing financial difficulties. The result of those interviews was equally as ambiguous and confusing as determining the circumstances of the contract's approval.

The discussions are summarized below:

As previously stated, Rickey Lee was in the hospital at the time of the June 28, 2010, meeting. Mr. Lee indicated that when the contract was brought to him it was already approved by the Board, so there was no reason not to sign it. He said, "It was a done deal." Lee went on to state "he about had another heart attack when he saw the amount." Lee felt the Superintendent deserved a raise, but knew the District did not have the funds for that size of an increase. Lee also stated he was involved in a discussion with the Superintendent in which she mentioned the idea of asking the

Board for a raise. He felt her salary should have been increased to around \$55,000.00.

- Hubert Adkins felt the Superintendent deserved a salary increase but didn't think the District had the funds for an increase of that size. Adkins voted in favor of the increase because that is what the majority of the Board wanted.
- Leonard Walker stated that he believes the Board acted hastily in its decision to increase Dr. Williams' salary without adequate financial information. He indicated that he expressed his concern in the meeting that the District could not afford to pay that much in salary, but he was only one vote against four so he went along with the majority.
- Yolanda Wiggins did not recall how the decision to provide Dr. Williams with a raise was determined.
- Robert Lang stated that the Board was under the gun and Dr. Williams insisted on a base salary of \$88,000.00. Lang stated he did not believe they could find another superintendent to replace Dr. Williams. Lang also indicated that he tried to negotiate the salary down to \$60,000.00, but Dr. Williams would not consent to a lower offer. He felt Dr. Williams deserved a raise but thought \$88,000.00 was far more than he considered reasonable.

When interviewed, the individual members of the Board disagreed with the amount of the Superintendent's compensation and thought it was either unreasonable or more than the District could afford; however, apparently the contract amount had somehow been approved. Although we could not find specific approval for the contract or the salary increase in the minutes, and the board interviews were conflicting in various respects, none of the Board members disputed Dr. Williams' claim that they had approved the contract and the salary increase.

The Superintendent's justification and/or rationalization for the 151% increase seemed insufficient under the circumstances.

We also spoke with Dr. Williams who indicated that in the prior year she worked seven days a week for \$36,000 and, as she stated, "got the school back in the black." Dr. Williams commented that her salary was consistent with amounts other superintendents receive across the State and added that she had donated a lot to the school, specifically \$42,000 in

books. When asked if she had a receipt for the book donation, Dr. Williams stated she did not actually purchase the books. She obtained some books from friends and others from her home. The school principal assessed the value of her donation to be approximately \$42,000.

The above was all that was offered as justification for a salary increase that arguably contributed to the District's ongoing financial problems and hastened the closure of the school. During the same meeting as the apparent contract approval, it was already known that budget cuts at the state level were going to happen. Only the amount of the cuts for the District was in question on June 28, 2010.

The FY11 contract for the former Superintendent exceeded the statutory limitation on administrative services expenditures found at 70 O.S. § 18-124.

Title 70 O.S. § 18-124 states, in part:

C. Any school district with an average daily attendance (ADA) of five hundred (500) or fewer students for the preceding year which expends for *administrative services* in the 2005-06 school year or any school year thereafter, less expenditures for legal services, more than ten percent (10%) of the amount it expends for total expenditures, less expenditures for legal services, shall have the amount which exceeds the ten percent (10%) withheld the following year from the Foundation and Salary Incentive Aid for the school district. (emphasis added)

Section E of the same statute states that "the total amount of time" for a superintendent "shall be included as administrative services," without regard to whether the superintendent performed any other duties in addition to administration. The final budget/estimate of needs report for the District for FY11 totaled \$866,742, including both original and supplemental appropriations.

The contract amount (\$90,400) for the former Superintendent, without any other administrative costs, would have exceeded the 10% limitation. The final budget/estimate of needs report for FY11 shows \$201,948 in "warrants issued" for "general" and "school" administration, or approximately 23.3% of total school expenditures in FY11, contrary to the above statute.

The 151% salary increase would impact potential severance pay calculations for the former Superintendent.

At a prior school district closure, OSDE records indicated Dr. Williams received \$44,000 in severance pay from the State's "School Consolidation Assistance Fund" following the closure of Liberty School District in FY09. The FY08 Liberty contract included a \$50,000 salary, with a "bonus" clause of \$5,000, if that district's "account balances are in the black" at June 30, 2008. Liberty School was a dependent school district located in Okmulgee County.

Title 70 O.S. 7-203 (c.) provides for "severance" pay for school personnel that are left without employment following a school closure situation. That statute reads, in part:

"c. employment assistance for personnel of the several districts who are not employed by the consolidated or annexing district. Employment assistance may include provision of a severance allowance for administrators, teachers and support personnel not to exceed eighty percent (80%) of the individual's salary or wages, exclusive of fringe benefits, for the school year preceding the consolidation or annexation." (emphasis added)

The interview with Board Member Lang indicates he had tried to negotiate a lesser salary, but Dr. Williams would not agree to anything less than \$88,000. As the District's chief executive officer, it is reasonable to conclude Dr. Williams was as knowledgeable or more knowledgeable of the precarious financial condition of the District as anyone involved.

The difference in potential severance pay between the FY10 contract for \$36,000 compared to the new FY11 contract for \$88,000 amounted to \$41,600 ($$88,000 - $36,000 = $52,000 \times 80\% = $41,600$). The potential increase in severance pay from the FY11 raise would be more than the original FY10 total salary figure.

The Superintendent received early payment of approximately \$16,400 of her salary due to a 20% advance salary payment clause in her new FY11 employment contract.

The amount of reduced State Aid to the District was known in July 2010 and had been electronically delivered to school districts statewide on <u>July 20, 2010</u>. A report, detailing the State Aid budget cuts for all school districts in the state, was posted on the OSDE website, as of July 27, 2010.

The report can still be viewed on the State Department of Education's website at:

http://www.sde.state.ok.us/Finance/StAid/pdf/CompStateAidFunding.pdf

In August 2010, the month prior to the September 13 meeting in which the state's budget cuts were announced to the Board, the Superintendent was paid her regular monthly salary, plus an additional salary amount of \$16,436. The additional salary was due to a clause in the new FY11 employment contract that provided for one payment of 20% of the total contract amount by August 1, 2010.

The new contract for Dr. Williams also included a "vehicle allowance" of \$200 per month, or \$2,400 annually. In July 2010, the first month of FY11, Dr. Williams was paid the contractual monthly salary plus vehicle allowance of \$7,533.33 (\$90,400 / 12 months = \$7,533.33). In August, according to the "employee earnings audit" report for the District, she was paid a gross monthly salary of \$23,969.70. The intention of the additional salary paid in August was to fulfill the contract provision mentioned above, which reads:

The superintendent's salary shall be paid in one payment of twenty percent of the total amount of this contract by August 1, 2010 and twelve monthly installments in the same manner as salary payment of the District's other twelve-month employees and subject to all lawful withholdings. (emphasis added)

Payment prior to goods or services being rendered is contrary to a provision of the Constitution of Oklahoma.

Article X § 15A of the Constitution of Oklahoma:

A. Except as provided by this section, the credit of the State shall not be given, pledged, or <u>loaned</u> to any <u>individual</u>, company, corporation, or association, municipality, or political subdivision of the State, nor shall the State become an owner or stockholder in, nor make donation by gift...to any company, association, or corporation. (emphasis added)

In general, a significant portion of school employees' compensation is funded by the State. In addition, another section in the Constitution of Oklahoma uses similar wording to explicitly apply the same standard to political subdivisions of the State.

Article X § 17 of the Constitution of Oklahoma:

The Legislature shall not authorize any county or subdivision thereof, city, town, or incorporated district, to become a stockholder in any company, association, or corporation, or to obtain or appropriate money for, or levy any tax for, or to *loan* its credit to any corporation, association, or *individual*. (emphasis added)

In the government sector, goods and services are billed or claimed when rendered, <u>not in "advance."</u> The Oklahoma Central Purchasing Act, 74 § 85.44B states, in part:

Payment for products or services pursuant to a contract executed by a state agency, whether or not such state agency is subject to the Oklahoma Central Purchasing Act, Section 85.1 et seq. of this title, <u>shall be made only after products have been provided or services rendered</u>. (emphasis added)

The above statute is an example of the practical implementation of Art. X § 15A on the state level. Paying a portion of the Superintendent's employment contract, prior to the appropriate time period of that salary having been earned, is for all practical purposes a noninterest bearing "loan" of public funds to Dr. Williams and contrary to Art. X § 17, and to the following.

Article X § 11 of the Constitution of Oklahoma provides:

The receiving, directly or indirectly, by any officer of the State, or of any county, city, or town, or member or officer of the Legislature, of any interest, profit, or perquisites, arising from the use or loan of public funds in his hands, or moneys to be raised through his agency for State, city, town, district, or county purposes shall be deemed a felony. Said offense shall be punished as may be prescribed by law, a part of which punishment shall be disqualification to hold office. (emphasis added)

Summary & Conclusion

Although the District's financial condition was still precarious, Dr. Williams negotiated a 151% increase in her salary and vehicle allowance for FY11, in spite of the certainty of budget cuts that were anticipated. In the month (July 2010) following the approval of her new contract at the end of June 2010, the OSDE electronically notified the District, then posted a report of the extent of the state's budget cuts on its website.

Since Dr. Williams was the chief executive officer for the District, and chiefly responsible for the overall administration of the District, it can be presumed that she became, or should have become, aware of the amount of budget cuts shortly after the notification and posting by OSDE. Dr. Williams had a fiduciary duty to disclose to the Board the amount of the budget cuts and to make an assessment of the likely impact of those budget cuts on the District, as soon as that information became available.

Instead, according to Board minutes, the budget cut information was *not* provided to the Board, until the September 13th board meeting, seven to eight weeks after the electronic notification sent to the District and the State Aid funding report had been posted on the OSDE website, *and* after Dr. Williams had already processed, or caused to be processed, the potentially illegal "advance" salary payment of \$18,080 (\$90,400 X 20% = \$18,080).

The difference between the 20% advance figure and the \$16,436 excess paid in August is the difference between the monthly salary calculated *prior* to the 20% advance and the monthly salary calculated for the balance of the contract *following* the advance.

In addition, following the state budget cuts that became known at the start of the fiscal year, Dr. Williams had a fiduciary duty to the Board and a legal duty to make any necessary adjustments to the District's appropriations and expenditures, in order to keep the District in compliance with statutory budget restrictions in 68 O.S. § 3019, 70 O.S. § 5-135 and 70 O.S. § 18-124.

With regard to certification requirements for school superintendent, 70 O.S. § 6-189 (F) provides:

"Certificates may be revoked by the State Board of Education for willful violation of any rule of the Board or of any federal or state law or other proper cause but only after sufficient hearing has been given before the Board."

Recommendation

The State Board of Education should determine if action is warranted for this matter.

OBJECTIVE III. Review travel claims submitted for reimbursement.

Procedure

A previous audit performed by our office for the period July 1, 2007 through December 31, 2009, identified problems with documentation of mileage reimbursements. To determine if corrective action had been taken, we reviewed travel claims paid during FY11 to the end of fieldwork date of May 27, 2011.

Finding

The District had little funding for travel in its final year. There was a minimal number of travel claims submitted during FY11. The claims we reviewed appeared to be adequately documented.

We noted one payment to the Superintendent for \$1,340 with no corresponding travel claim filed. After inquiring about the October 2010 travel claim that supported the reimbursement, the document was provided by the Superintendent.

The payment was for 2,680 miles claimed for the first quarter period (July-Sept) of FY11, at a rate of \$0.50 per mile. Dr. Williams was reimbursed \$1,340 for "mileage," while <u>also receiving</u> a \$200 a month vehicle allowance, based on a provision in her contract.

The contract states in relevant part:

The Superintendent shall be entitled to receive \$200 per month vehicle allowance for the twelve months of the contract.

Furthermore, prior to our obtaining the contract from the State Department of Education, Dr. Williams confirmed that she would be seeking reimbursement for an additional \$1,569 she was claiming for mileage incurred after October 2010. She requested that we include the \$1,569 claim in the listing of estimated liabilities reported in Objective I.

Typically, there are three methods that public entities use for vehicle travel and travel reimbursements:

• Employees may be provided a district-owned vehicle to use for district related travel.

- Employees may be paid a set amount for a vehicle or travel "allowance," generally established as a part of the employee's contracted compensation.
- Or, employees may submit a mileage claim for reimbursement for a personal vehicle used for District purposes at an authorized rate per mile.

Any of the methods a district chooses is permissible; however, it is generally not intended for two or more of the methods to be used simultaneously, as was done in this case.

The \$1,340 received by the Superintendent for "mileage reimbursement" appeared to be an expense for which the Superintendent was already being compensated with the \$200 monthly vehicle allowance in her contract.

Recommendation

The State Department of Education and/or the succeeding school districts should consider filing a claim on Dr. Williams to recover the \$1,340 mileage reimbursement, or at a minimum, to recover the \$600 vehicle allowance paid for the July-Sept period of FY11.

OBJECTIME IV. Review payroll and contracts.

Procedure

A previous audit performed by our office noted several findings relating to payroll and employee contracts for the period July 1, 2007 through December 31, 2009. These findings included:

- Employees were paid without contracts
- Employees were paid with unsigned contracts
- Employees were paid in excess of contract provisions

The focus of this objective was to follow-up on these findings to determine if corrective action had been taken. For FY11, we compared compensation paid to employees to the amount authorized by the employment contracts.

Finding

We noted that amounts paid to employees were consistent with the amounts authorized by the employment contracts. We did note three instances in which contracts were not on file with the District:

- The Superintendent's contract was missing from the school's records. We obtained a copy from the State Department of Education. The Superintendent's contract was addressed separately in Objective II.
- Contracts for two support employees, Jeffery Ward and Valorie Reed, were not in the District's files.

OBJUCTNATE V. Reptormates no fotoced assets

Procedure

In normal audit procedures, when testing the fixed asset inventory (equipment), we would select a sample of equipment from an inventory list and visually verify each item's existence. However, contrary to Oklahoma Administrative Code 210:25-5-4, the District did not maintain an inventory list or other inventory records. Section 210:25-5-4 provides, in part:

(h) Inventory cards or data processing records shall be kept on all equipment and removable fixtures, showing purchase order number when known, date of purchase (when known, if not known an estimated date shall be used), amount of purchase (if known, if not known present value must be estimated) a description of the item, the serial number (when applicable) and the location of the item.

Since there were no inventory records available, we reviewed vendor invoices for the fiscal years FY10 and FY11 and prepared a schedule of equipment purchases.

The school's equipment purchases in the last two fiscal years primarily consisted of computers and monitors. However, the descriptions on the invoices did not contain serial numbers; therefore, invoices could not be matched with any specific computer or monitor.

Typically, with computer equipment, an item that has a higher appeal and is more compact, such as a laptop, is more likely to "disappear."

Finding

At the time of our test, vendor files were not available prior to FY10; therefore, we could not determine an accurate estimate of computers, monitors, or other equipment items, that should have been on hand. The number of computers and monitors present at the District exceeded the number that had been purchased in the last two fiscal years.

Of the three laptops purchased in the two years tested, a laptop containing the description *ProBook WH286UT Notebook* with a cost of \$925 was missing. Based on the District's counterclaim against the former business

manager, the District believed the computer was in the possession of that individual.

DISCLAIMER

In this report there may be references to state statutes and legal authorities which appear to be potentially relevant to the issues reviewed by this Office. The State Auditor and Inspector has no jurisdiction, authority, purpose, or intent by the issuance of this report to determine the guilt, innocence, culpability, or liability, if any, of any person or entity for any act, omission, or transaction reviewed. Such determinations are within the exclusive jurisdiction of regulatory, law enforcement and judicial authorities designated by law.



OFFICE OF THE STATE AUDITOR AND INSPECTOR 2300 N. LINCOLN BOULEVARD, ROOM 100
OKLAHOMA CITY, OK 73105-4896

WWW.SAI.OK.GOV

Full	Legal Name:	Sequita Faye Woodard				Date: _		9/1/2011
Prev	ious Base Sala	ry (exclusive of fringe bei	nefits):					
	Base Salary			\$	42,325.00			
	Times 80%			\$	33,860.00			
		Maximum Severance					\$	33,860.00
						No. of		
						Pay		
Less	-	hly Income or Benefits:				Periods	ф	(7 400 00)
1)	Unemploymen			\$	7,400.00	x <u>* MBA</u>		(7,400.00)
	Teacher Retire					х	\$	-
	Workers Comp	*				x	\$	-
	Other employs	nent				Х	\$	
		Allowable Severance					\$	26,460.00
Time	oc Percentage	(enter "1" in the appropriat	e area)					
2)	Voluntary - 25		,		0%			
2)	OR	5 70						
	Mandatory - 5	5%	1		5%			
			07					
3)	Years of Servi		27		50%			
	Times Yearly	Percentage (See below)			3070			
4)	Efforts in seek	ing other employment						
	Active - 25%		1		25%			
	OR							
,	Non-active - 5	5%			0%			
		Total Percentage	•		80%			
		-						
Calc	. Severance Pa	y (Allowable Severance ti	mes Percenta	ige)		;	\$	21,168.00
		TOTAL SEVERAN	ICE AMO	UNI		;	\$	21,168.00
		Years of						
		Experience		P	ercentage			
	0		5		10%			
	6		10		20%			
	11	to	15		30%			
	,							

20

25

40%

50%

to

to

16

21

Other Justification for Reduction:

^{*} MBA - Maximum Benefit Allowance

Application for Severance Allowance 70 O.S. § 7-203(b)(3)

PLEASE FILL OUT AND SUBMIT THIS FORM WITH ALL APPROPRIATE DOCUMENTATION TO THE FINANCE DIVISION OF THE STATE DEPARTMENT OF EDUCATION BY SEPTEMBER I OF THE FISCAL YEAR IMMEDIATELY FOLLOWING THE FISCAL YEAR IN WHICH THE ANNEXATION OR CONSOLIDATION OCCURED

Date: 8/19/20/1 Phone: Teacher Number: 14942.8
Full Legal Name: Seguita Faye Woodard
Address: City: State Zip Code:
1. Employment: A. Employer: Bounton Public School Position: Classroom Teacher B. How long have you held this position? 27 years Full-time? Full-time
B. How long have you held this position? <u>A 1 year.</u> Full-time or part-time? <u>Full-time</u> ? <u>Full-</u>
(Please include a copy of your signed teaching contract evidencing your salary agreement) D. Date district was annexed or consolidated: 5/26/2011 Voluntary or mandatory? <u>Mandatory</u>
E. Were you a working employee of the district on the date listed above? NO. U.D. If no, please * explain: The last day of School was 5/20/2011, Hierefore it was the last day
F. If you were a teacher, were you career or probationary? <u>Areer</u>
G. Did you apply for a job with the annexing/receiving district(s)? <u>Ve.5</u> Were you offered employment?
(Please provide documentation from the district(s) of your offer or denial)
H. If yes, did you accept the position and on what date will you begin work?
I. If no, have you applied for employment with other districts in your area? YES If yes, where? MUSILOGELY PORTER, (Please provide documentation of your efforts to seek employment) Wagoner, Tahlequah -> I requested documentation from Partiel and Tahlequah, but usewed no response.
A. Have you applied for unemployment benefits? VES If yes, were you granted unemployment? VES
B. When did you apply? 5/23/2011 When did you or will you begin receiving benefits? 6/6/2011
C. How much do you receive in monthly unemployment benefits? 4244. (Please include documentation)
D. Have you applied for or are you receiving any other form of employment assistance (ie. Retirement,
Workers Compensation)? 70 What kind? - None -
E. On what date did you begin receiving or will you begin receiving benefits? - \(\frac{71}{a} - \)
F. How much will you be receiving in monthly benefits? (Please include documentation)
G. Did you apply for severance pay from the annexing/receiving district(s)? \(\frac{\mu}{no} \) When? \(\frac{\mu}{no} \) Were you approved? \(\frac{\mu}{no} \) (Please include documentation of your request and if denied, a copy of your denial)
H. If approved, how much are you receiving in severance allowance? #35,860. (Please include documentation)
* E. (cont) of work for all employees. (see attached form)

Full	Legal Name: Elsie Frances Caesar				_ Date: _			9/1/2011
Prev	ious Base Salary (exclusive of fringe bene	fits):						
	Base Salary		\$	15,235.00				
	Times 80%		\$	12,188.00				
	Maximum Severance					\$		12,188.00
					No. of			
					Pay			
	Weekly/Monthly Income or Benefits:		A	£ 40£ 00	Periods	φ		(5,486.00)
1)	Unemployment		\$	5,486.00	x * MBA			(5,400.00)
	Teacher Retirement				x	\$		
	Workers Compensation	·	ф.	100.00	x2	\$ \$		(396.00)
	Other employment		\$	198.00	x2	φ	,	(370.00)
	Allowable Severance					\$		6,306.00
Time	es Percentage (enter "1" in the appropriate	area)						
2)	Voluntary - 25%	•		0%				
_,	OR		-					
	Mandatory - 5%	1	-	5%				
3)	Years of Service	3						
-,	Times Yearly Percentage (See below)		-	10%				
4)	Efforts in seeking other employment							
.,	Active - 25%	1	_	25%				
	OR		_					
	Non-active - 5%		_	0%				
	Total Percentage			40%				
Calc	. Severance Pay (Allowable Severance tim	es Percent	age)			\$		2,522.00
	TOTAL SEVERAN			<u>r</u>		\$		2,522.00
					;			
	Years of		_			•		

	Years of Experience		Percentage
0	to	5	10%
6	to	10	20%
11	to	15	30%
16	to	20	40%
21	to	25	50%

Other Justification for Reduction:

^{*} MBA - Maximum Benefit Allowance

Application for Severance Allowance 70 O.S. § 7-203(b)(3)

PLEASE FILL OUT AND SUBMIT THIS FORM WITH ALL APPROPRIATE DOCUMENTATION TO THE FINANCE DIVISION OF THE STATE DEPARTMENT OF EDUCATION BY SEPTEMBER I OF THE FISCAL YEAR IMMEDIATELY FOLLOWING THE FISCAL YEAR IN WHICH THE ANNEXATION OR CONSOLIDATION OCCURED

Date: 9-1-2011 Phone: Phone: Teacher Number:
Full Legal Name: Jolse Fronces Cessor Social Security Number:
Address: State: State: Zip Code: State: Zip Code:
1. Employment:
A. Employer: Baynton - Muton Schools Position: Peceptronest
B. How long have you held this position? 340 Full-time or part-time? 2415 full tend 140 Port
B. How long have you held this position? 342 Full-time or part-time? 242 full tend 142 for the C. What was your base salary for the past year, exclusive of fringe benefits? 722 hour 16,613.04
(Please include a copy of your signed teaching contract evidencing your salary agreement)
D. Date district was annexed or consolidated: 5- 2011 Voluntary or mandatory? Inouditory.
E. Were you a working employee of the district on the date listed above? Upon If no, please explain:
F. If you were a teacher, were you career or probationary?
G. Did you apply for a job with the annexing/receiving district(s)? 4 Were you offered employment?
Ma_ (Please provide documentation from the district(s) of your offer or denial)
H. If yes, did you accept the position and on what date will you begin work?
I. If no, have you applied for employment with other districts in your area? (1980)
If yos, whore? Ididale, It Gelson, Otay.
(Please provide documentation of your efforts to sock employment) Called and they suid they were not taking any
2. Benefits: Applications
A. Have you applied for unemployment benefits? 49 If yes, were you granted unemployment? 49
B. When did you apply? 5-25-201 When did you or will you begin receiving benefits?
C. How much do you'receive in monthly unemployment benefits? 18920 (Please include documentation) 2, 484.
D. Have you applied for or are you receiving any other form of employment assistance (i.e. Retirement,
Workers Compensation)? What kind?
E. On what date did you begin receiving or will you begin receiving benefits?
F. How much will you be receiving in monthly benefits? 4/98.55 (Please include documentation)
F. How much will you be receiving in monthly benefits? 198,55 (Please include documentation) G. Did you apply for severance pay from the annexing/receiving district(s)? 550 When? 500 When? 500 Were V. 6. F192 YOU approved? 4.4. (Please include documentation of your request and if denied, a copy of your denial)
you upproved 1
H. If approved, how much are you receiving in severance allowance? (Please include
documentation)

Ful	l Legal Name:	Martin Otis Miller			Date: _		9/1/2011
	_						
Pre	vious Base Sala	ry (exclusive of fringe benefits					
	Base Salary		\$	13,965.30			
	Times 80%		\$	11,172.00			44 4== 00
		Maximum Severance				\$	11,172.00
					No. of		
T	XXX 1.7 (5.40 4)	de Turane ou Danofita			Pay Periods		
		nly Income or Benefits:	¢	4,680.00		¢	(4,680.00)
1)	Unemploymen		<u>. </u>	4,000.00		\$	(1,000.00)
	Teacher Retire				X	\$	-
	Workers Comp				x	Φ C	_
	Other employs	nent			^	Ψ	
		Allowable Severance				\$	6,492.00
Tim	nes Percentage	(enter "1" in the appropriate area	a)				
2)	Voluntary - 2:	_		0%			
•	OR						
	Mandatory - 5	_	1	5%			
3)	Years of Servi	ce _	· 4				
	Times Yearly	Percentage (See below)		10%			
4)	Efforts in seek	ing other employment					
-,	Active - 25%		1	25%			•
	OR	_					
	Non-active - 5	_		0%			
		Total Percentage		40%	•		
Cal	c. Severance Pa	y (Allowable Severance times)	Percentage)			\$	2,597.00
		TOTAL SEVERANCE		Γ	•	\$	2,597.00
		Years of					

		Years of Experience	,	Percentage
<u></u>		Experience		
	0	to	5	10%
1	6	to	10	20%
	11	to	15	30%
	16	to	20	40%
	21	to	25	50%

Other Justification for Reduction:

^{*} MBA - Maximum Benefit Allowance

12.1.11

Application for Severance Allowance 70 O.S. § 7-203(b)(3)
PLEASE FILL OUT AND SUBMIT THIS FORM WITH ALL APPROPRIATE DOCUMENTATION TO THE FINANCE DIVISION OF THE STATE DEPARTMENT OF EDUCATION BY SEPTEMBER I OF THE FISCAL YEAR IMMEDIATELY FOLLOWING THE FISCAL

Teacher Number: Full Legal Name: Mortin Otis Miller ____ Social Security Number 1. Employment: A. Employer: Bapton-Noton School Position: Janitor B. How long have you held this position? 300 Smorths Full-time or part-time? Full Time C. What was your base salary for the past year, exclusive of fringe benefits? +9.00 hr 14.716. (Please include a copy of your signed teaching contract evidencing your salary agreement). D. Date district was annexed or consolidated: 5-20-11 Voluntary or mandatory? Mandatory? B. Were you a working employee of the district on the date listed above? explain: F. If you were a teacher, were you career or probationary? G. Did you apply for a job with the annexing/receiving district(s)? Yes Were you offered employment? No. (Please provide documentation from the district(s) of your offer or denial) H. If yes, did you accept the position and on what date will you begin work? If no, have you applied for employment with other districts in your area? Yes If yes, where? Hoskell Midway (Please provide documentation of your efforts to seek employment) 2. Benefits: A. Have you applied for unemployment benefits? Yes If yes, were you granted unemployment? Yes B. When did you apply? 5-29-1/ When did you or will you begin receiving benefits? 6-5-1/ C. How much do you receive in monthly unemployment benefits? \$\frac{3180}{2180}\$ (Please include documentation) D. Have you applied for or are you receiving any other form of employment assistance (i.e. Retirement, Workers Compensation)? No What kind? E. On what date did you begin receiving or will you begin receiving benefits? F. How much will you be receiving in monthly benefits? <u>I SO wk</u> (Please include documentation) G. Did you apply for severance pay from the annexing/receiving district(s)? 1/10 When? Were you approved? _____ (Please include documentation of your request and if denied, a copy of your denial) H. If approved, how much are you receiving in severance allowance? (Please include documentation) Martin Miller said his hours were cut back from Hohrs to 32 hrs. The amount in the letter \$13,965.30 is correct, Ik which was provided to him by snelbie Williams. Received Time Sep. 2, 2011 3:03PM No. 2412

Full	Legal Name:	Joe Edward Mitche				Date: _		<u>9/1/2011</u> ·
Pre	vious Base Sala Base Salary Times 80%	ry (exclusive of fring Maximum Severan		<u>\$</u> \$	15,500,00 12,400.00		\$	12,400.00
Less 1)	Weekly/Month Unemploymen Teacher Retire Workers Comp Other employm	ement pensation	ĭts:		5,018.00	No. of Pay Periods X MBA X X X	\$ \$ \$ \$	(5,018.00)
		Allowable Severano	ce				\$	7,382.00
Tim 2)	es Percentage Voluntary - 25 OR Mandatory - 5		opriate area)	*Taylors 1	0% 5%			
3)	Years of Servi Times Yearly	ce Percentage (See belov	<u>.</u> w)		10%			
4)	Efforts in seek Active - 25% OR	ing other employmen	it	Topy of the second	25%			
	Non-active - 5	5%	74, ke 15 k k s		0%	•		
		Total Percentage			40%			
Calc	. Severance Pa	y (Allowable Severa					\$	2,953.00
		TOTAL SEVE	RANCE AMO	UNT			\$	2,953.00
	0 6 11 16 21	to to	5 10 15 20 25		10% 20% 30% 40% 50%			

Other Justification for Reduction:

^{*} MBA - Maximum Benefit Allowance

Application for Severance Allowance 70 O.S. § 7-203(b)(3)

PLEASE FILL OUT AND SUBMIT THIS FORM WITH ALL APPROPRIATE DOCUMENTATION TO THE FINANCE DIVISION OF THE STATE DEPARTMENT OF EDUCATION BY SEPTEMBER 1 OF THE FISCAL YEAR IMMEDIATELY FOLLOWING THE FISCAL YEAR IN WHICH THE ANNEXATION OR CONSOLIDATION OCCURED

Date: 🙎	Phone: Teacher Number:
Full Leg	gal Name: Joe Edulated Mitchell Social Security Number:
Address	City: State: Zip Code
1.	Employment:
A.	Employment: Employer: Boyle Too McTok Estate Position: Vitare Text T
В.	How long have you held this position? Full-time or part-time?
C.	How long have you held this position? Full-time or part-time? Full-time or part-time? What was your base salary for the past year, exclusive of fringe benefits?
	(Please include a copy of your signed teaching contract evidencing your salary agreement)
D.	Date district was annexed or consolidated: 3-20-11 Voluntary or mandatory? FER PROTERY
E.	Were you a working employee of the district on the date listed above? If no, please
	explain:
F.	If you were a teacher, were you career or probationary?
G.	Did you apply for a job with the annexing/receiving district(s)? 155 Were you offered employment?
	(Please provide documentation from the district(s) of your offer or denial)
H.	If yes, did you accept the position and on what date will you begin work?
I,	If no, have you applied for employment with other districts in your area?
	If yes, where?
	(Please provide documentation of your efforts to seek employment)
2.	Benefits:
A.	Have you applied for unemployment benefits?
В.	Have you applied for unemployment benefits? Fig. If yes, were you granted unemployment? Fig. When did you or will you begin receiving benefits? Fig. 11
C.	How much do you receive in monthly unemployment benefits? (Please include documentation)
D.	Have you applied for or are you receiving any other form of employment assistance (i.e. Retirement,
	Workers Compensation)? What kind?
E.	On what date did you begin receiving or will you begin receiving benefits?
F.	How much will you be receiving in monthly benefits?(Please include documentation)
G.	Were
	you approved? (Please include documentation of your request and if denied, a copy of your denial)
H.	If approved, how much are you receiving in severance allowance?(Please include
	documentation)

Full Legal Name	e: <u>Jordan</u> l	Ryan Reed		wow.		_ D	ate: _		9/1/2011
n i n .a			. M4 - 1 -						
	• •	sive of fringe bene	ents):	φ	4 640 00				
Base Salary		•		<u>\$</u> \$	4,649.00				
Times 80%				Þ	3,719.00			ø	2 710 00
	Maximu	ım Severance						\$	3,719.00
						7	No. of		
						•	Pay		
Less Weekly/Mo	onthly Incon	ne or Benefits:			· ·	P	eriods		
1) Unemployn	nent					x <u>*</u>	MBA	\$	-
Teacher Re	tirement					x		\$	-
Workers Co	ompensation		_			x		\$	-
Other emple			_			x		\$	
	Allowah	ole Severance	•					\$	3,719.00
	TAILO II AD	10 Devermee						т	-,
Times Percenta	ge (enter "1"	in the appropriate	area)						
2) Voluntary -	_	12 2	•		0%				
OR									
Mandatory	- 5%		1		5%				
3) Years of Se	rvice		1						
•		ge (See below)			10%				
,	-,	,5 (555 5525 11)							
4) Efforts in se	eking other	employment '							
Active - 25	-	1 /	1		25%				
OR									
Non-active	- 5%				0%				
	Total Per	rcentage	_		40%				
Calc. Severance	Pay (Allowa	able Severance tin	nes Percentag	ge)			<u></u>	\$	1,488.00
	ТОТА	L SEVERAN	CE AMOI	NT			_	\$	1,488.00
	10111	L DL (DATE (<i>-</i> 2112			=	Υ	
	Y	Years of							
		perience		Per	rcentage				
	0	to	5		10%				
	6	to	10		20%				
	11	to	15		30%				
	16	to	20		40%				
1	21		25		50%				
		to	23		30 70				
Other Justi	fication for	Reduction:					•		

^{*} MBA - Maximum Benefit Allowance

Application for Severance Allowance 70 O.S. § 7-203(b)(3)
PLEASE FILL OUT AND SUBMIT THIS FORM WITH ALL APPROPRIATE DOCUMENTATION TO THE FINANCE DIVISION OF THE STATE DEPARTMENT OF EDUCATION BY SEPTEMBER 1 OF THE FISCAL YEAR IMMEDIATELY FOLLOWING THE FISCAL YEAR IN WHICH THE ANNEXATION OR CONSOLIDATION OCCURED

Date; _	8-31-20// Phone Phone Teacher Number:
Full Le	egal Name: Jordan Ryan Reed Social Security Number:
Addres	s: Bowlet, Box 30 3 City: Conference State: The Code:
1.	Employment:
A.	Employer: Boynton-Moton P.S. Position: Teach assist & Cook How long have you held this position? Employer Full-time or part-time? FT
В.	How long have you held this position? Emauls Full-time or part-time? FT
C,	What was your base salary for the past year, exclusive of fringe benefits?
	(Please include a copy of your signed teaching contract evidencing your salary agreement)
D.	Date district was annexed or consolidated: 7-1-1/ Voluntary or mandatory? Mandatory
E.	Were you a working employee of the district on the date listed above? 425 If no, please explain:
F.	If you were a teacher, were you career or probationary?
G,	Did you apply for a job with the annexing/receiving district(s)? 425 Were you offered employment?
	(Please provide documentation from the district(s) of your offer or denial)
Н.	If yes, did you accept the position and on what date will you begin work?
I.	If no, have you applied for employment with other districts in your area?
	If yes, where?
	(Please provide documentation of your efforts to seek employment)
2.	Benefits:
A.	Have you applied for unemployment benefits? \sqrt{es} If yes, were you granted unemployment? \sqrt{o}
B.	When did you apply? 5-2011 When did you or will you begin receiving benefits?
C.	How much do you receive in monthly unemployment benefits? (Please include documentation)
D.	Have you applied for or are you receiving any other form of employment assistance (i.e. Retirement,
	Workers Compensation)? What kind?
E.	On what date did you begin receiving or will you begin receiving benefits?
F.	How much will you be receiving in monthly benefits? (Please include documentation)
G.	Did you apply for severance pay from the annexing/receiving district(s)? No When? Were
	you approved? (Please include documentation of your request and if denied, a copy of your denial)
H.	If approved, how much are you receiving in severance allowance? (Please include
	documentation)

Full	Legal Name:	Valerie Dawn Reed				_ Date: _		9/1/2011
	•							
Pre	vious Base Sala	ry (exclusive of fringe b	enefits):					
	Base Salary			\$	23,383.00			
	Times 80%			\$	18,706.00		ф	10 50 600
		Maximum Severance					\$	18,706.00
						No. of		
Y	n XXI o olislas (Marsel	hla Ingoma on Ranafites				Pay Periods		
		hly Income or Benefits:				x * MBA	\$	-
1)	Unemploymer Teacher Retire		•			XX	\$	-
	Workers Comp		•		**	x	\$	-
	Other employs		•			х	\$	
	Office Chiproys	mont	•					
		Allowable Severance					\$	18,706.00
Tim	es Percentage	(enter "1" in the appropri	ate area)					
2)	Voluntary - 2				0%			
•	OR							
	Mandatory - 5	5%	1		5%			
3)	Years of Servi	ce	1			,		
-/		Percentage (See below)			10%			
4)	Efforts in seek	ing other employment						
.,	Active - 25%		1		25%			
	OR							
	Non-active - 5	5%			0%			
		Total Percentage			40%			
Cala	. Carananaa Da	y (Allowable Severance	times Percents	rae)			\$	7,482.00
Carc	. Severance I a					:		
		TOTAL SEVERA	NCE AMO	UNI		:	\$	7,482.00
		Years of						
		Experience		P	ercentage			
_	0		5		10%			
·	6		10		20%			
	11		15		30%			
	16		20		40%			
	21		25		50%			

Other Justification for Reduction:

^{*} MBA - Maximum Benefit Allowance

Application for Severance Allowance 70 O.S. § 7-203(b)(3)
PLEASE FILL OUT AND SUBMIT THIS FORM WITH ALL APPROPRIATE DOCUMENTATION TO THE FINANCE DIVISION OF THE STATE DEPARTMENT OF EDUCATION BY SEPTEMBER I OF THE FISCAL YEAR IMMEDIATELY FOLLOWING THE FISCAL YEAR IN WHICH THE ANNEXATION OR CONSOLIDATION OCCURED

Date: _	8-31-2011 Phone: Phone: Teacher Number:
Full Le	gal Name: Valerie Dawn Reed Social Security Number:
Addres	s: City: State: State: Zip Code: 442
1.	Employment:
A.	Employer: Boyn ton - Moton Position: Cafe Mgr.
В.	Employer: Boyn ton = Moton Position: Cafe Mgr. How long have you held this position? 9-months Full-time or part-time? Full-time?
C.	What was your base salary for the past year, exclusive of fringe benefits? \$\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
	(Please include a copy of your signed teaching contract evidencing your salary agreement)
D.	Date district was annexed or consolidated: MANDA tony
E.	Were you a working employee of the district on the date listed above? yes If no, please
	explain:
F.	If you were a teacher, were you career or probationary?
G.	Did you apply for a job with the annexing/receiving district(s)? Yes Were you offered employment?
	(Please provide documentation from the district(s) of your offer or denial)
Н.	If yes, did you accept the position and on what date will you begin work?
I,	If no, have you applied for employment with other districts in your area?
	If yes, where?
	(Please provide documentation of your efforts to seek employment)
2.	Benefits:
A.	Have you applied for unemployment benefits? $\frac{\sqrt{c_5}}{\sqrt{c_5}}$ If yes, were you granted unemployment? $\frac{\sqrt{O}}{\sqrt{A}}$ When did you or will you begin receiving benefits? $\frac{N}{A}$
В.	When did you apply? $5 - 2011$ When did you or will you begin receiving benefits? N/A
C.	How much do you receive in monthly unemployment benefits? none (Please include documentation)
D.	Have you applied for or are you receiving any other form of employment assistance (i.e. Retirement,
	Workers Compensation)? What kind?
E.	On what date did you begin receiving or will you begin receiving benefits?
F.	How much will you be receiving in monthly benefits? (Please include documentation)
G.	Did you apply for severance pay from the annexing/receiving district(s)? <u>in o</u> When? Were
	you approved? (Please include documentation of your request and if denied, a copy of your denial)
Н.	If approved, how much are you receiving in severance allowance?(Please include
	documentation)

A of or 1602 to 1 3 to 25 may 25,1115

Full	Legal Name:	Billie Jean Tennison				_ Date: _		9/1/2011
	-	,						
Pre	Base Salary	ry (exclusive of fringe ber	nefits):	\$	8,090.00			
	Times 80%	7.F. 1		\$	6,472.00		φ	6,472.00
		Maximum Severance					\$	0,4/2.00
						No. of Pay		
	-	hly Income or Benefits:		φ	0.007.00	Periods	Φ.	(2,007.00)
1)	Unemploymen		•	\$	2,007.00	x *MBA	٠,	(2,007.00)
	Teacher Retirement					X	\$ \$	-
	Workers Comp	='	-		X	. Ø . ¢	_	
	Other employs	nent	-			х	Ψ	
		Allowable Severance					\$	4,465.00
Tim	_	(enter "1" in the appropriat	e area)					
2)	Voluntary - 2:	5%			0%			
	Mandatory - 5	5%	1		5%			
3)	Years of Servi Times Yearly	ce Percentage (See below)	4		10%			
4)	Active - 25%	ing other employment	1		25%			
	OR Non-active - 5	3%			0%			
		Total Percentage			40%			
Calc. Severance Pay (Allowable Severance times Percentage)							\$	1,786.00
	·	`` TOTAL SEVERAN			ı	,	\$	1,786.00
		Years of						
	-	Experience		Pe	ercentage			
	0	to	5		10%			
	6	to	10		20%			
	11	to	15		30%			
	16	to	20		40%			

25

50%

Other Justification for Reduction:

to

21

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Date:	8+31-11 Phone: Phone: Teacher Number: N/A							
Full L	egal Name: Billie Jean Tennison Social Security Number:							
Addre	State: State: State: State: Zip Code:							
1.	Employment:							
A.	Employer: Boynton Moton School Position: Guidance Counselor							
В.								
C.	What was your base salary for the past year, exclusive of fringe benefits? #800 / month							
	(Please include a copy of your signed teaching contract evidencing your salary agreement)							
D.	Date district was annexed or consolidated: 5-26-11 Voluntary or mandatory? mandatory?							
E.	Were you a working employee of the district on the date listed above? If no, please							
	explain:							
F.	If you were a teacher, were you career or probationary?							
Ġ.	Did you apply for a job with the annexing/receiving district(s)? Were you offered employment?							
	no (Please provide documentation from the district(s) of your offer or denial) you have copies							
Н.	If yes, did you accept the position and on what date will you begin work?							
I.	If no, have you applied for employment with other districts in your area?							
	If yes, where?							
	(Please provide documentation of your efforts to seek employment) Previously sent to your office							
2.	Benefits:							
A.	Have you applied for unemployment benefits? Yes If yes, were you granted unemployment? Yes							
В.	When did you apply? Gune 2011 When did you or will you begin receiving benefits? June 2011							
C.	How much do you receive in monthly unemployment benefits 109/mont (Please include documentation)							
D.	Have you applied for or are you receiving any other form of employment assistance (i.e. Retirement,							
	Workers Compensation)?							
E.	On what date did you begin receiving or will you begin receiving benefits?							
F.	How much will you be receiving in monthly benefits? (Please include documentation)							
G.	Did you apply for severance pay from the annexing/receiving district(s)? 105 When? Were							
	you approved? no (Please include documentation of your request and if denied, a copy of your denial)							
H.	If approved, how much are you receiving in severance allowance?(Please include							
	documentation)							

Ful	I Legal Name:	Jeffrey A. Ward			Date:	9/1/2011
Pre	evious Base Sala Base Salary Times 80%	ry (exclusive of fringe be Maximum Severance	nefits):	\$ ¹ 0,550.00 \$ 8,440.00	**************************************	8,440.00
					No. of	
					Pay	
	•	hly Income or Benefits:	i		Periods	
1)	Unemploymer Teacher Retire			a vakova administrativa. Santavis administrativa	x MBA \$	-
	Workers Com				x	<u>.</u> .
	Other employs				x \$	_
	o max omproji		•			
		Allowable Severance		•	\$	8,440.00
Tim	ies Percentage	(enter "1" in the appropria	te area)			
2)	Voluntary - 2:			0%		·
	Mandatory - 5	5%		5%		
3)	Years of Servi Times Yearly	ce Percentage (See below)		. 10%		
4)	Efforts in seek Active - 25% OR	ing other employment		25%		
	Non-active - 5	5%	tenen sena	0%		
		Total Percentage	-	40%		
Calo	. Severance Pa	y (Allowable Severance ti	imes Percenta	ge)	\$	3,376.00
		\$	3,376.00			
			······································			
	Years of Experience			Percentage		
	0	to	5	10%		
	6	to	10	20%		
	11	to	15	30%		
	16	to	20	40%		
	21	to	25	50%		•

Other Justification for Reduction:

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Application for Severance Allowance 70 O.S. § 7-203(b)(3).
PLEASE FILL OUT AND SUBMIT THIS FORM WITH ALL APPROPRIATE DOCUMENTATION TO THE FINANCE DIVISION OF THE STATE DEPARTMENT OF EDUCATION BY SEPTEMBER I OF THE FISCAL YEAR IMMEDIATBLY FOLLOWING THE FISCAL YEAR IN WHICH THE ANNEXATION OR CONSOLIDATION OCCURED Teacher Number: Jeffrey Anthis Ward Social Security Number: Address: City: ____ State: Zip Code: ____ 1. Employment; A. Employer: Bounton Pablic School Position: Bus Driver B. How long have you held this position? Aug 2010 - may 2011 Full-time or part-time? part - time Irm of the C. What was your base salary for the past year, exclusive of fringe benefits? 10,560.00 10.0000 (Please include a copy of your signed teaching contract evidencing your salary agreement) D. Date district was annexed or consolidated: 3-/21/11 Voluntary or mandatory? mandatory? E. Were you a working employee of the district on the date listed above? Ves If no, please F. If you were a teacher, were you career or probationary? G. Did you apply for a job with the annexing/receiving district(s)? <u>Yes</u> Were you offered employment? No (Please provide documentation from the district(s) of your offer or denial) H. If yes, did you accept the position and on what date will you begin work? If yes, where? Moiris Twin Hills (Please provide documentation of your efforts to seek employment) Benefits: Have you applied for unemployment benefits? No If yes, were you granted unemployment? When did you apply? _____ When did you or will you begin receiving benefits? _____ How much do you receive in monthly unemployment benefits? _____(Please include documentation) Have you applied for or are you receiving any other form of employment assistance (i.e. Retirement, Workers Compensation)? NonE What kind? E. On what date did you begin receiving or will you begin receiving benefits? How much will you be receiving in monthly benefits? _____ (Please include documentation) G. Did you apply for severance pay from the annexing/receiving district(s)? Mo When? _____ Were you approved? _____ (Please include documentation of your request and if denied, a copy of your denial) H. If approved, how much are you receiving in severance allowance? _____(Please include

Part-time pastor

documentation)

Full	l Legal Name:	Brenda Joyce Wesley	47			Date: _		9/1/2011
			••					
Тио	vious Pasa Sala	ry (exclusive of fringe l	anafite).					
rre	Base Salary	ry (exclusive of filinge)	Jenemaj.	\$	29,122.00			
	Times 80%			\$	23,298.00			
	1111C3 30 /0	Maximum Severance		Ψ	23,270.00		\$	23,298.00
		maniful colorado					•	,
						No. of		
T	- XXI I-I/N/I 41	. I T				Pay Periods		
	•	hly Income or Benefits	i			x * MBA	¢	
1)	Unemployment Teacher Retirement Workers Compensation					XX	. \$	_
						x	\$	-
	Other employr	•				х	· \$	_
			,			<u> </u>		
		Allowable Severance					\$	23,298.00
Tim	es Percentage	(enter "1" in the appropr	iate area)					
2)	Voluntary - 25				0%			
	OR			•				
	Mandatory - 5	%	1	,	. 5%			•
3)	Years of Servi	ce	1					
	Times Yearly l	Percentage (See below)			10%			
4)	Efforts in seek	ing other employment						
•	Active - 25%		1		25%			
	OR							
	Non-active - 5	%	·		0%			
		Total Percentage	•		40%			
Calc	. Severance Pa	y (Allowable Severance	times Percenta	ige)			\$	9,319.00
	•	TOTAL SEVERA	•		i	:	\$	9,319.00
		, 0 1112 02 , 224				1		
		Years of		_				
		Experience		P6	ercentage			
	0	to	5		10%			
	6	to	10		20%			
	11	to	15		30%			
	16	to	20 25		40%			
	21	to			50%			
	Other Justifica	ation for Reduction:						

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Application for Severance Allowance 70 O.S. § 7-203(b)(3) PLEASE FILL OUT AND SUBMIT THIS FORM WITH ALL APPROPRIATE DOCUMENTATION TO THE FINANCE DIVISION OF THE Teacher Number Secretary / DRENDY JOYCE WESLEY Social Security Number: Address Employer: DYM ton-Moton Public School Position: Secretary Ensumberance Clerk B. How long have you held this position? 1 year Pull-time or part-time? Lu C. What was your base salary for the past year, exclusive of fringe benefits? \$29,285,10 (Please include a copy of your signed teaching contract evidencing your salary agreement)—A + 5d e D. Date district was annexed or consolidated: My 26, 2011 Voluntary or mandatory? Manda tory? Were you a working employee of the district on the date listed above? <u>UCS</u> explain; F. If you were a teacher, were you career or probationary? $_{\mathcal{A}}/\mathcal{A}$ G. Did you apply for a job with the annexing/receiving district(s)? (1eS Were you offered employment? (Please provide documentation from the district(s) of your offer or denial) already 5 cm > H. If yes, did you accept the position and on what date will you begin work? I. If no, have you applied for employment with other districts in your area? <u>UES</u> If yes, where? Checotah Public, HASKell & Midway (Please provide documentation of your efforts to seek employment) Benefits: 2. A. Have you applied for unemployment benefits? NO If yes, were you granted unemployment? — When did you apply? When did you or will you begin receiving benefits? How much do you receive in monthly unemployment benefits? ——— (Please include documentation) Have you applied for or are you receiving any other form of employment assistance (i.e. Retirement, Workers Compensation)? $\sqrt{0}$ What kind? On what date did you begin receiving or will you begin receiving benefits? How much will you be receiving in monthly benefits? N/A G. Did you apply for severance pay from the annexing/receiving district(s)? UES When? MAY 2011 Were you approved? <u>MO</u> (Please include documentation of your request and if denied, a copy of your denial) H. If approved, how much are you receiving in severance allowance? NONE (Please include documentation) G. East) Midway or HASKELL DID NOT Offer me a job DR SeverANCE-