

<b>EQUAL EMPLOYMENT OPPORTUNITY COMMISSION</b> <b>STATE AND LOCAL GOVERNMENT INFORMATION (EEO-4)</b> EXCLUDE SCHOOL SYSTEMS AND EDUCATIONAL INSTITUTIONS (Read attached instructions prior to completing this form)				<b>APPROVED BY</b> <b>OMB</b> <b>3046-0008</b> EXPIRES 12/31/2005	
<u>DO NOT ALTER INFORMATION PRINTED IN THIS BOX</u>				MAIL COMPLETED FORM TO: EEO-4 Reporting Center PO Box 8127 Reston VA 20195	
<b>A. TYPE OF GOVERNMENT (Check one box only)</b>					
<input type="checkbox"/> 1. State <input type="checkbox"/> 2. County <input type="checkbox"/> 3. City <input type="checkbox"/> 4. Township <input type="checkbox"/> 5. Special District <input type="checkbox"/> 6. Other (Specify) _____					
<b>B. IDENTIFICATION</b>					
1. NAME OF POLITICAL JURISDICTION (If same as label, skip to Item C)					
2. Address--Number and Street		CITY/TOWN		COUNTY	
				STATE/ZIP	
				EEOC USE ONLY A B	
<b>C. FUNCTION</b>					
(Check one box to indicate the function(s) for which this form is being submitted. Data should be reported for all departments and agencies in your government covered by the function(s) indicated. If you cannot supply the data for every agency within the function(s) attach a list showing name and address of agencies whose data are not included.)					
1. Financial Administration. Tax billing and collection, budgeting, purchasing, central accounting and similar financial administration carried on by a treasurer's, auditor's or comptroller's office and  GENERAL CONTROL. Duties usually performed by boards of supervisors or commissioners, central administration offices and agencies, central personnel or planning agencies, all judicial offices and employees (judges, magistrates, bailiffs, etc.)		8. HEALTH. Provision of public health services, outpatient clinics, visiting nurses, food and sanitary inspections, mental health, alcohol rehabilitation service, etc.			
2. STREETS AND HIGHWAYS. Maintenance, repair, construction and administration of streets, alleys, sidewalks, roads, highways and bridges.		9. HOUSING. Code enforcement, low rent public housing, fair housing ordinance enforcement, housing for elderly, housing rehabilitation, rent control.			
3. PUBLIC WELFARE. Maintenance of homes and other institutions for the needy; administration of public assistance. (Hospitals and sanatoriums should be reported as item 7.)		10. COMMUNITY DEVELOPMENT. Planning, zoning, land development, open space, beautification, preservation.			
4. POLICE PROTECTION. Duties of a police department sheriff's, constable's, coroner's office, etc., including technical and clerical employees engaged in police activities.		11. CORRECTIONS. Jails, reformatories, detention homes, halfway houses, prisons, parole and probation activities			
5. FIRE PROTECTION. Duties of the uniformed fire force and clerical employees. (Report any forest fire protection activities as item 6.)		12. UTILITIES AND TRANSPORTATION. Includes water supply, electric power, transit, gas, airports, water transportation and terminals.			
6. NATURAL RESOURCES. Agriculture, forestry, forest fire protection, irrigation drainage, flood control, etc., and PARKS AND RECREATION. Provision, maintenance and operation of parks, playgrounds, swimming pools, auditoriums, museums, marinas, zoos, etc.		13. SANITATION AND SEWAGE. Street cleaning, garbage and refuse collection and disposal. Provision, maintenance and operation of sanitary and storm sewer systems and sewage disposal plants.			
7. HOSPITALS AND SANATORIUMS. Operation and maintenance of institutions for inpatient medical care.		14. EMPLOYMENT SECURITY STATE GOVERNMENTS ONLY			
		15. OTHER (Specify on Page Four)			

**D. EMPLOYMENT DATA AS OF JUNE 30**

(Do not include elected/appointed officials. Blanks will be counted as zero)

**1. FULL-TIME EMPLOYEES (Temporary employees are not included)**

JOB CATEGORIES	ANNUAL SALARY (In thousands 000)	MALE						FEMALE										
		TOTAL (COLUMNS B-K)	NON-HISPANIC ORIGIN		HISPANIC	ASIAN OR PACIFIC ISLANDER	AMERICAN INDIAN OR ALASKAN NATIVE	NON-HISPANIC ORIGIN		HISPANIC	ASIAN OR PACIFIC ISLANDER	AMERICAN INDIAN OR ALASKAN NATIVE						
			WHITE	Black				White	Black									
		A	B	C	D	E	F	G	H	I	J	K						
OFFICIALS ADMINISTRATORS	1. \$0.1-15.9																	
	2. 16.0-19.9																	
	3. 20.0-24.9																	
	4. 25.0-32.9																	
	5. 33.0-42.9																	
	6. 43.0-54.9																	
	7. 55.0-69.9																	
	8. 70.0 PLUS																	
PROFESSIONALS	9. \$0.1-15.9																	
	10. 16.0-19.9																	
	11. 20.0-24.9																	
	12. 25.0-32.9																	
	13. 33.0-42.9																	
	14. 43.0-54.9																	
	15. 55.0-69.9																	
	16. 70.0 PLUS																	
TECHNICIANS	17. \$0.1-15.9																	
	18. 16.0-19.9																	
	19. 20.0-24.9																	
	20. 25.0-32.9																	
	21. 33.0-42.9																	
	22. 43.0-54.9																	
	23. 55.0-69.9																	
	24. 70.0 PLUS																	
PROTECTIVE SERVICE	25. \$0.1-15.9																	
	26. 16.0-19.9																	
	27. 20.0-24.9																	
	28. 25.0-32.9																	
	29. 33.0-42.9																	
	30. 43.0-54.9																	
	31. 55.0-69.9																	
	32. 70.0 PLUS																	
PARA- PROFESSIONALS	33. \$0.1-15.9																	
	34. 16.0-19.9																	
	35. 20.0-24.9																	
	36. 25.0-32.9																	
	37. 33.0-42.9																	
	38. 43.0-54.9																	
	39. 55.0-69.9																	
	40. 70.0 PLUS																	
ADMINISTRATIVE SUPPORT	41. \$0.1-15.9																	
	42. 16.0-19.9																	
	43. 20.0-24.9																	
	44. 25.0-32.9																	
	45. 33.0-42.9																	
	46. 43.0-54.9																	
	47. 55.0-69.9																	
	48. 70.0 PLUS																	

**D. EMPLOYMENT DATA AS OF JUNE 30 (Cont.)**

(Do not include elected/appointed officials. Blanks will be counted as zero)

**1. FULL-TIME EMPLOYEES (Temporary employees are not included)**

JOB CATEGORIES	ANNUAL SALARY (In thousands 000)	MALE						FEMALE				
		TOTAL (COLUMNS B-K)	NON-HISPANIC ORIGIN		HISPANIC	ASIAN OR PACIFIC ISLANDER	AMERICAN INDIAN OR ALASKAN NATIVE	NON-HISPANIC ORIGIN		HISPANIC	ASIAN OR PACIFIC ISLANDER	AMERICAN INDIAN OR ALASKAN NATIVE
			WHITE	Black				White	Black			
		A	B	C	D	E	F	G	H	I	J	K
SKILLED CRAFT	49. \$0.1-15.9											
	50. 16.0-19.9											
	51. 20.0-24.9											
	52. 25.0-32.9											
	53. 33.0-42.9											
	54. 43.0-54.9											
	55. 55.0-69.9											
	56. 70.0 PLUS											
SERVICE MAINTENANCE	57. \$0.1-15.9											
	58. 16.0-19.9											
	59. 20.0-24.9											
	60. 25.0-32.9											
	61. 33.0-42.9											
	62. 43.0-54.9											
	63. 55.0-69.9											
	64. 70.0 PLUS											
65. TOTAL FULL TIME (LINES 1 – 64)												

**2. OTHER THAN FULL-TIME EMPLOYEES (Including temporary employees)**

66. OFFICIALS/ADMIN												
67. PROFESSIONALS												
68. TECHNICIANS												
69. PROTECTIVE SERVICE												
70. PARA-PROFESSIONAL												
71. ADMIN. SUPPORT												
72. SKILLED CRAFT												
73. SERVICE/MAINTENANCE												
74. TOTAL OTHER THAN FULL TIME (LINES 66 – 73)												

**3. NEW HIRES DURING FISCAL YEAR - Permanent full time only JULY 1 – JUNE 30**

75. OFFICIALS/ADMIN												
76. PROFESSIONALS												
77. TECHNICIANS												
78. PROTECTIVE SERVICE												
79. PARA-PROFESSIONAL												
80. ADMIN. SUPPORT												
81. SKILLED CRAFT												
82. SERVICE/MAINTENANCE												
83. TOTAL NEW HIRES (LINES 75 – 82)												

REMARKS (List National Crime Information Center (NCIC) number assigned to any Criminal Justice Agencies whose data are included in this report)

\*\*\*LIST AGENCIES INCLUDED ON THIS FORM\*\*\*

CERTIFICATION. I certify that the information given in this report is correct and true to the best of my knowledge and was reported in accordance with accompanying instructions. (Willfully false statements on this report are punishable by law, US Code, Title 18, Section 1001.)

NAME OF PERSON TO CONTACT REGARDING THIS FORM

TITLE

ADDRESS (Number and Street, City, State, Zip Code)

TELEPHONE NUMBER

extension:

FAX NUMBER

DATE

TYPED NAME/TITLE OF AUTHORIZED OFFICIAL

SIGNATURE

E-MAIL