

County work performed in: Stark County

JANITORIAL SERVICE SURVEY

Illinois Department of Labor Survey In accordance with 30 ILCS 500

Phone: 309-695-6123

E-mail: Superintendent: bellott@stark100.com / Payroll: rlane@stark100.com

Fax #: 309-695-3062

Employer Insurance Costs*	\$ Pension/IMRF %*	Vacation Policy
PPO Plan:		
Employee only: <u>654.16</u> /Mo	Employer IMRF %: <u>4.77%</u> (2024)	Yrs. of Service Vacation Days
Employee +1: <u>654.16</u> /Mo	OR	If in contract, list page:
Employee/Spouse: <u>654.16</u> /Mo	Employer \$ Contribution <u>N/A</u>	<u>1-4</u> <u>10/year</u>
Family: <u>654.16</u> /Mo	Minimum work hours to be eligible:	<u>5-14</u> <u>15/year</u>
Minimum work hours to be eligible:	<u>600 hours/year</u>	<u>15+</u> <u>20/year</u>
<u>30 hours/week</u>		<u>X</u> <u>X</u>
		Minimum work hours to be eligible: <u>40 hours/week</u> <u>12 month</u>

* Include here only the amount contributed by the Employer; not any employee deductions.

Worker Title	# Hours/Week	Hourly Pay	
Maintenance Director	40+	\$32.69	} IMRF Vacation + Insurance
Head Custodian	40	\$19.50	
Head Custodian	40	\$19.50	
Custodian	40	\$18.04	
Custodian	40	\$15.60	} IMRF only
Custodian	20	\$14.00	
Custodian	15	\$14.00	

County work performed in: Stark County

FOOD SERVICE SURVEY

Illinois Department of Labor Survey

In accordance with 30 ILCS 500

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PPO Plan: Employee only: <u>654.16</u> /Mo Employee +1: <u>654.16</u> /Mo Employee/Spouse: <u>654.16</u> /Mo Family: <u>654.16</u> /Mo Minimum work hours to be eligible: <u>30 hours/week</u>	Employer IMRF %: <u>4.77%</u> <u>(2024)</u> OR Employer \$ Contribution <u>N/A</u> Minimum work hours to be eligible: <u>600/ year</u>	<table border="1"> <tr> <th>Yrs. of Service</th> <th>Vacation Days</th> </tr> <tr> <td colspan="2">If in contract, list page:</td> </tr> <tr> <td><u>1-4</u></td> <td><u>10/year</u></td> </tr> <tr> <td><u>5-14</u></td> <td><u>15/year</u></td> </tr> <tr> <td><u>15+</u></td> <td><u>20/year</u></td> </tr> <tr> <td><u>X</u></td> <td><u>X</u></td> </tr> </table>	Yrs. of Service	Vacation Days	If in contract, list page:		<u>1-4</u>	<u>10/year</u>	<u>5-14</u>	<u>15/year</u>	<u>15+</u>	<u>20/year</u>	<u>X</u>	<u>X</u>
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* Include here only the amount contributed by the Employer; not any employee deductions.

Worker Title	# Hours/Week	Hourly Pay	
Food Service Director	40+ ^{SCHOOL YEAR ONLY}	\$22.58	IMRF + Insurance
Assistant Cook	35	\$14.80	IMRF + Insurance
Assistant Cook	<29	\$14.00	no benefits (subbing for 1 month @ end of school year)
Cook's Helper	28.75	\$14.50	IMRF
Cook's Helper	28.75	\$15.76	IMRF
Cook's Helper	28.75	\$15.76	IMRF
Cook's Helper	20	\$14.50	IMRF
Cook's Helper	35	\$15.60	IMRF + Insurance

No Vacation (not 12 month)



OFF for the summer

these are the hours/week that

they worked during the last month of the school year