

**MADISON COUNTY  
PERSONNEL ACTION**

Department MCDC Employee Name Tyler Kimble  
 Job title D/O Employee SS # \_\_\_\_\_  
 Effective Date 3/27/23

**Hire**

Full-time  Part-time  Temporary  Hourly  Salaried   
 Position: D/O new position or replacement  if so, whom? \_\_\_\_\_  
 Rate of Pay \$ 17.56

- Job references checked ( if applicable)
- Background checked ( if applicable)
- Driving Record checked ( if applicable)

**Promotion**

From Position: \_\_\_\_\_ To Position: \_\_\_\_\_  
 Rate of Pay \$ \_\_\_\_\_ Rate of Pay \$ \_\_\_\_\_

**Termination**

- Death
- Dismissed
- Resigned
- Retired
- Documentation Attached

**Approval of Elected Official or Department Head**

Printed Name Jeffrey B. Husted Signature [Signature] Date 3/23/23

**Forward to Administration for Paperwork Processing**

**Administrative paperwork**

|                     | Initials | Date  |
|---------------------|----------|-------|
| Copy to Payroll     | _____    | _____ |
| Copy to HR          | _____    | _____ |
| Copy to Comptroller | _____    | _____ |
| Copy for BOS Agenda | _____    | _____ |

**MADISON COUNTY  
PERSONNEL ACTION**

Department MCDC Employee Name Lakeisha Sims  
 Job title D/O Employee SS # \_\_\_\_\_  
 Effective Date 3/27/23

**Hire**

Full-time  Part-time  Temporary  Hourly  Salaried   
 Position: D/O new position or replacement  if so, whom? \_\_\_\_\_  
 Rate of Pay \$ 17.56

- Job references checked ( if applicable)
- Background checked ( if applicable)
- Driving Record checked ( if applicable)

**Promotion**

From Position: \_\_\_\_\_ To Position: \_\_\_\_\_  
 Rate of Pay \$ \_\_\_\_\_ Rate of Pay \$ \_\_\_\_\_

**Termination**

- Death
- Dismissed
- Resigned
- Retired
- Documentation Attached

**Approval of Elected Official or Department Head**

Printed Name Jeffrey B. Husted Signature [Signature] Date 3/23/23

**Forward to Administration for Paperwork Processing**

**Administrative paperwork**

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**MADISON COUNTY  
PERSONNEL ACTION**

Department MCDC Employee Name William Irwin  
 Job title D/O Employee SS # \_\_\_\_\_  
 Effective Date 3/30/23

**Hire**

Full-time  Part-time  Temporary  Hourly  Salaried   
 Position: \_\_\_\_\_ new position or replacement  if so, whom? \_\_\_\_\_  
 Rate of Pay \$ \_\_\_\_\_

- Job references checked ( if applicable)
- Background checked ( if applicable)
- Driving Record checked ( if applicable)

**Promotion**

From Position: CPL. To Position: SGT.  
 Rate of Pay \$ 19.50 Rate of Pay \$ 20.50

**Termination**

- Death
  - Dismissed
  - Resigned
  - Retired
- Documentation Attached

**Approval of Elected Official or Department Head**

Printed Name Jeffrey B. Husted Signature [Signature] Date 3/31/23

**Forward to Administration for Paperwork Processing**

**Administrative paperwork**

|                     | Initials | Date  |
|---------------------|----------|-------|
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| Copy to HR          | _____    | _____ |
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