From: bmoshier@the-insurance-shoppe.com [mailto:bmoshier@the-insurance-shoppe.com]

Sent: Sunday, July 17, 2016 6:56 PM

**To:** <u>rbarbian@ci.foley.mn.us</u> **Subject:** Tuesday Meeting

Bob-

Hi Bob Bryan Moshier here I am writing to let you know I would like to get on the Tuesday council meeting agenda so that I can get council approval for the annual SC-16 repot. I Plan on stopping by your office to drop off a copy of the form Monday afternoon so that you have a copy and if we need to make copies for the council we would be able to do so. We are not changing anything at this time so I am not expecting to take up much time we just have to have it in the minutes for the auditor that we have the approval of the council every year. If you have any questions please let me know otherwise like I said I will drop a schedule of the form off for you in the afternoon if you have any questions we can talk it out then also. Thank you Bob have a good day

Bryan Moshier

From: bmoshier@the-insurance-shoppe.com [mailto:bmoshier@the-insurance-shoppe.com]

Sent: Monday, July 18, 2016 3:30 PM

To: Robert Barbian

Subject: RE: Tuesday Meeting

Bob

I have attached the document for you. Also if you want to add this to the consent agenda that would be fine. I know in the past when we have not made any changes that they have done that. So to keep your meeting moving and so I don't take up any time the consent agenda would be great. I will be at the meeting for this part in case there are any other questions I would be able to answer them otherwise I will keep quite and let the meeting role on. Thank you

Bryan Moshier

### **Active Member Information**

Enter Annual Benefit Level in effect for 2016:

\$3,200

(If you change your benefit level before 12/31/2016, the SC must be recalculated and recertified at the new level.)

L	2016								_	2017
L		Total Active Member Liabilities 581,248								
		Leaves of To end					end of 2016	То	633,536 end of 2017	
			Date of Birth	Fire Department Entry Date	Absence and Breaks in Service	Return to Service Member	Years of	Accrued	Years of	Accrued
<u> </u>	Name	Status			(months)	?	Service	Liability	Service	Liability
1	Kaproth, Tom	Active	05/10/1954	02/06/1974	0		43	137,600	44	140,800
2	Pappenfus, Mark	Active	09/15/1966	09/03/1986	0		30	96,000	31	99,200
3	Beutz, Josh	Active	08/18/1976	05/16/1995	0		22	70,400	23	73,600
4	Nadeau, Larry	Active	05/31/1966	01/03/1996	0		21	67,200	22	70,400
5	Herbrand, Rick	Active	04/05/1975	02/05/2003	0		14	37,888	15	41,728
6	Foss, Al	Deferred	04/21/1980	09/07/2005	0		11	0	12	0
7_	Harren, Chris	Active	11/09/1975	01/03/2007	0		10	24,320	11	27,456
8	Orton, Adam	Active	02/21/1985	01/03/2007	0		10	24,320	11	27,456
9	McMillin, Mike	Active	09/26/1982	02/05/2008	0		9	21,312	10	24,320
10	Moshier, Bryan	Active	10/26/1984	02/05/2008	0		9	21,312	10	24,320
11	Fleck, Jared	Active	05/18/1987	01/07/2009	0		8	18,432	9	21,312
12	Andrew Shaw	Active	12/18/1980	02/03/2010	0		7	15,744	8	18,432
13	Todd Foremann	Active	11/19/1969	02/03/2010	0		7	15,744	8	18,432
14	Adam Foss	Active	06/14/1990	09/08/2011	0		5	10,688	6	13,120
15	Greg Poganski	Active	05/29/1986	09/08/2011	0		5	10,688	6	13,120
16	Eric Emerson	Separated/Not Vested	05/01/1974	09/05/2012			4	0	5	0
17	Heather Martell	Separated/Not Vested	02/12/1974	09/04/2013			3	0	4	0
18	Gary Bautch	Active	12/02/1984	09/02/2015			1	1,920	2	3,968
19	Jerrik Manthie	Active	05/22/1984	09/02/2015			1	1,920	2	3,968
20	Kyle Edwards	Active	10/11/1988	09/02/2015			1	1,920	2	3,968
21	Travis Janson	Active	04/13/1991	09/02/2015			1	1,920	2	3,968
22	Rich Cousin	Active	11/15/1976	09/02/2015			1	1,920	2	3,968
23		Choose Status						0		0
24		Choose Status						0		0
25		Choose Status						0		0
26		Choose Status						0		0
27		Choose Status						0		0
28		Choose Status						0		0
29		Choose Status						0		0
30		Choose Status						0		0
31		Choose Status						0		0
32		Choose Status						0		0
33		Choose Status						0		0
34		Choose Status						0		0
15		Choose Status						0		0
6		Choose Status				1		0		0

Total Deferred Member Liabilities 2016

## OFFICE OF THE STATE AUDITOR

## **Deferred Member Information**

(fully or partially vested)

35,966

Total D	eferred Memb	er Liabilities	2017		35,966					
1	Enter all in	nformation as	it perta	ins to thi						
Manchau Manc	D:	0 44			Benefit Level		Months			
Member Name:		, Scott			at Separation:	1,850	Service	Аге Ра	aid	Yes
Minimu	n Years Requir	ed to Vest:	10	DOB:	11/15/1971	Deferred	Interest I	Paid		
Service Dates:	Entry:	01/03/1996	Se	paration:	12/04/2007	(Select "Yes	" if offered.)			
LOAs and E	BIS (in months):		V	esting %:	37					
Return to Servi						If Interes	is Paid,	Choos	ве Туре:	
Total Service:						Choose T				
2016 Estimated	Liability:	8,15	7			Period In	terest is F	Paid:		
2017 Estimated	Liability:	8,15	7	Status:	Deferred	Choose L	nterest Pa	yment	Period	
For Relief ROR	up to 5%, OSA	A ROR up to 5	% or Bo	ard Set Ro	OR up to 5% enter					
1985:%				%			2005:	%	2011:	%
1986:%	1991:	%			2001:		2006:		_	%
1987:%	1992:	%			2002:		2007:			
1988:%	1993:	%			2003:		2008:		_	
1989:%	1994:	%	1999:	<u>%</u>	2004:		2009:			
+Rate of return is	calculated using	g the earnings	projecte	d on Page	4 of this form.		2010:			
2	Enter all inf	formation as i	t pertain	ns to this	member.					
					Benefit Level		Months of	of		
Member Name:	Swanson, S	cott			at Separation:	2,100	Service A	re Pai	d _	Yes
Minimum	Years Require	d to Vest:	_10_	DOB:	04/30/1967	Deferred I	nterest Pa	aid		
Service Dates:	Entry:	10/01/1997	Sep	aration:	01/01/2011	(Select "Yes"	if offered.)			
LOAs and BI	S (in months):	8	Ves	ting %:	68					
Return to Service						If Interest	is Paid C	'hoose	Tyne	
Total Service:	ears: 12				7	Choose Ty		7110036	, туро.	
2016 Estimated I	 _iability:			_		Period Inte	-	id:		
2017 Estimated I	_ Liability:	17,969	•	Status: D	Deferred	Choose Int	erest Pay	ment	Period	
				rd Set RO	R up to 5% enter i					
1985:%				9/0	2000:		005:	%	2011-	0/0
1986:%				%			006:			
1987:%				%			007:			
1988:%				%			008:			
1989:%	1994:9		_	%	2004:		009:			
Rate of return is c	alculated using	the earnings of	rojected	on Page 4	of this form.	_	010:			

Form SC-16 Fol	ey Fire Relief Asso	ciation					Page	e 2 - Con
3 Enter all	information as it perta	ins to thi	s member.					Marie Control
Member Name: Al Foss			Benefit Level		Months	of		
			at Separation:	3,200	Service	Are Pa	aid	Yes
Minimum Years Requi	red to Vest: 10	DOB:	04/21/1980	Deferred	Interest	Paid		
Service Dates: Entry	/: 09/07/2005 Sej	paration:	12/09/2015	(Select "Yes"	if offered.)			
LOAs and BIS (in months)	): Ve	sting %:	30					
Return to Service Member?	(Select "	Yes" if appl	icable.)	If Interest	is Paid.	Choos	e Tyne	
Total Service: Years: 10	Months (	if paid):	3	Choose T		011000	o rypo.	
2016 Estimated Liability:	9,840	-		Period Int	-	aid:		
2017 Estimated Liability:	9,840	Status: ]	Deferred	Choose In			Period	
For Relief ROR up to 5%, OS	A ROR up to 5% or Boa	rd Set R(	OR up to 5% enter			J		
1985: % 1990:	% 1995:	%	2000:	%	2005:	0/0	2011	0/2
1986:% 1991:		%	2001:		2006:			
1987:% 1992:	_% 1997:_	%	2002:		2007:			
1988:% 1993:	% 1998:	%	2003:	%	2008:			
1989:% 1994:	% 1999:_	%	2004:		2009:			
Rate of return is calculated usin							_	%+
4 Enter all in	formation as it pertain	e to this	mamhar					
	- variation is potanti	3 10 1113	Benefit Level		Months of	ıf		
Member Name:			at Separation:		Service A	_	i	
Minimum Years Require	d to Vest:	DOB:		Deferred Ir			-	=
Service Dates: Entry:	Sepa			(Select "Yes" if		ira		
LOAs and BIS (in months):						-		
	(Select "Ye			If Interest is	Doid C	h	T	
otal Service: Years:			2010.)	Choose Typ		noose	Type:	
2016 Estimated Liability:		F/-				ia.		
2017 Estimated Liability:		Status: De	eferred	Period Interest is Paid: Choose Interest Payment Period				
For Relief ROR up to 5%, OSA						ment P	e1100	

1995: \_\_\_\_% 2000: \_\_\_\_%
1996: \_\_\_\_% 2001: \_\_\_\_%
1997: \_\_\_\_% 2002: \_\_\_\_%
1998: \_\_\_\_% 2003: \_\_\_\_%

2004: \_\_\_\_\_%

1999: %

+Rate of return is calculated using the earnings projected on Page 4 of this form.

2005: \_\_\_\_\_ % 2011: \_\_\_\_ %

2006: \_\_\_\_\_ % 2012: \_\_\_\_ %

2007: \_\_\_\_\_% 2013: \_\_\_\_\_%

2008: \_\_\_\_\_ % 2014: \_\_\_\_ %

2009: \_\_\_\_\_ % 2015: \_\_\_\_ %

2010: % 2016:

1985: \_\_\_\_ % 1990: \_\_\_\_ %

1986: % 1991: %

1987: \_\_\_\_\_% 1992: \_\_\_\_\_\_%

1988:\_\_\_\_\_% 1993:\_\_\_\_\_%

1989: \_\_\_\_% 1994: \_\_\_\_%

# Unpaid Installment Information

Enter here the name of each member who has been paid portions of a pension benefit and who still has outstanding liabilities.

												Name
	Unpaid Installment	T T T T T T T T T T T T T T T T T T T	Unpaid Installment	Status								
												Birth Date
												Entry Date
												Separation Date
Totals											Treviously 1 and	Amount
0											Liability	2016 Estimated
0											Liability	20

Form SC-16		Foley Fire	Relief Association
OFFICE OF THE STA	TE AUDITOR	<b>3</b>	
	2016	2015	
Total Active Member Liabilities	2016 581,248	2017 633,536	7
Total Deferred Member Liabilities	35,966	35,966	-
Total Unpaid Installments	0	0	
Grand Total Special Fund Liability	A. 617,214	B. 669,502	1
Normal Cost (Cell B minus Cell A)			C. 52,288
Decination of Not 4			
Projection of Net Assets for Year Ending December 31, 2016			
Special Fund Assets at December 31, 2015 (FIRE-15 Fo	orm ending assets)		1 670,255
Projected Income for 2016			
Fire State Aid (2015 fire state aid of \$40,842 may be increase		D. 41,000	
Supplemental State Aid (actual 2015 supplemental state aid Municipal / Independent Fire Dept. Contributions		E. 416	 
Interest / Dividends		F. 7,500	
Appreciation / (Depreciation)		G. 10,000	
Member Dues		H. 5,000	
Other Revenues		1. 0	
Total Projected Income for 2016 (Add Lines D through J	<b>\</b>		2 (2.016)
( and any again	,		2 63,916
Projected Expenses for 2016			
Service Pensions (fill in individual pension amounts below)	Te.	. 0	
Names:	\$ Amounts:		
Other Benefits	J L		
Administrative Expenses	J.,		
Total Projected Expenses for 2016 (Add Lines K through M)	M	7,500	2 7 500 1
Projected Net Assets at December 31, 2016 (Add Lines 1 and			7,500
rojection of Surplus or (Deficit) as of December 31, 2016	-, second Cine s)		4 726,671
Projected Assets (Line 4)			
2016 Accrued Liability (Page 4, cell A)			5 726,671
Surplus or (Deficit) (Line 5 minus Line 6)			6 617,214 7 109,457
			4473147

**Calculation of Required Contribution** 

Def	icit Information - C	-	Deficit Information - Adjusted						
Year Incurred	Original Amount	Amount Retired as of 12/31/2015	Original Amount	Amount Retired as of 12/31/2016					
2007	0	0		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	10 ROTHE 1/1/2017				
2008	0	0							
2009	0	0							
2010	0	0							
2011	0	0							
2012	0	0							
2013	0	0							
2014	0	0							
2015	0	0							
2016									
otals			0						

	Normal Cost					(0.000)
	Projected Administrative Expense	Enter 2015 Admin Exp he		700	8	52,288
	Amortization of Deficit (Total of Original Amount column x 0.10)	Edici 2015 Admini Exp n	ле: 9	590		611
	10% of Surplus				10	0
-1	Fire and Supplemental State Aid				11	10,946
- 1					12	41,416
м	Member Dues				13	0
I	5% of Projected Assets at December 31, 2016				14	36,334
ı	Required Contribution (Add Lines 8, 9 and 10, subt	ract Lines 11, 12, 13 and 14	If negative	zaro in diamlassal )	15	30,334
I	No required contribution due in 2017.	11, 12, 13 0110 11,	II HOERHYC	, zero is displayed.)	10[	U

## 2016 Maximum Benefit Worksheet

	A	В	С	D	Е
	Fire State Aid and			Active Members	Per Year
	Supplemental State	Municipal	10% of	in Relief	Average
	Aid	Contribution	Surplus *	Association	[(A+B+C)/D]
	(From FIRE-15)	(From FIRE-15)	(SC-15 or Actuarial)	(From FIRE-15)	
2015	50,835	7,500	11,800	22	3,188
	(From RF-14)	(From RF-14)	(SC-14 or Actuarial)	(From RF-14)	
2014	48,439	7,500	6,409	18	3,464
	(From RF-13)	(From RF-13)	(SC-13 or Actuarial)	(From RF-13)	
2013	49,477	7,500	8,848	23	2,862

<sup>\*</sup> If deficit for the year, leave blank.

Average available financing per active member for the most recent 3-year period: (sum of column E divided by 3)

3,171

Maximum Lump Sum Benefit Level under Minn. Stat. § 424A.02, subd. 3

5,800