

OFFICE OF THE STATE'S ATTORNEY

JAYMI STERLING
STATE'S ATTORNEY



CIRCUIT COURT
DIVISION

ST. MARY'S COUNTY, MARYLAND

January 19, 2023

The Honorable James "Randy" Guy
The Honorable Eric Colvin
The Honorable Michael L. Hewitt
The Honorable Mike Alderson, Jr.
The Honorable Scott R. Ostrow

Post Office Box 653
Leonardtown, Maryland 20650

SUBJ: Conversion of Senior Legal Assistant position to Paralegal

REF: (a) Md. Criminal Procedure Code Ann. § 15-419

In accordance with paragraph (b)(2) of reference (a), the State's Attorney hereby converts one vacant Senior Legal Assistant position to Paralegal, effective immediately. This position is part of the administrative support staff necessary for the operation of the St. Mary's County State's Attorney's Office and the county commissioners shall provide.

FROM	GRADE/STEP/SALARY	TO	GRADE/STEP SALARY
SR LEG ASST 40030	C06/1 47694.40/22.93	PARALEGAL	C09/1 66705.60/32.07


This action is in accordance with the above-cited statute specific to the State's Attorney's Office, not a traditional action requiring approval such as for County departments.

Sincerely,

Copy to:
David Weiskopf
Catherine Pratson

REQUEST FOR PERSONNEL ACTION

INITIATING DEPARTMENT COMPLETES BOXES 1 - 10

1. NAME (Last, First, Middle) Vacant		2. SOCIAL SECURITY NO. (Last Four Only)		3. DATE OF REQUEST 1/17/2023	
4. EFFECTIVE DATE 1/18/2023		5. NATURE OF ACTION		6. COMMENTS: Convert vacant Sr Leg Asst 40030 to Paralegal 10181	
FROM:		7. POSITION TITLE AND NUMBER		TO: PARALEGAL - SAO - 10181	
FROM: (Annual/Hourly) C06/1 47694.40/22.93		8. SALARY GRADE/STEP ANNUAL/HOURLY		TO: (Annual/Hourly) C09/1 66705.60/32.07	
FROM:		9. DEPARTMENT DIVISION/ PROJECT & ACCOUNT NO.		TO: N/C	
Initiating Department Head Signature: 		10. INITIATING DEPARTMENT HEAD SIGNATURE		Date:	

HUMAN RESOURCES USE ONLY

RETIREMENT (SORP)		MD PENSION		HEALTH BENEFITS		RETIREE HEALTH		LIFE INSURANCE		W/C Code	Appointed	Elected
Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
MERIT	CONTRACT	GRANT	<input type="checkbox"/> Full-time	<input type="checkbox"/> Salary	FLSA Status:		Scheduled Hours Code	Overtime Code				
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Regular Part-Time	<input type="checkbox"/> Hourly	<input type="checkbox"/> Exempt	<input type="checkbox"/> Non-Exempt		Paid <input type="checkbox"/>	Comp <input type="checkbox"/>			
Subject to Probationary/Trial Period: Yes <input type="checkbox"/> No <input type="checkbox"/>			COMPLETION DATE: _____ Completed by HR Representative/Date: _____									

Comments: _____

APPROVALS

VERIFIED BY HR: _____ FTE/Position Available	VERIFIED BY FINANCE _____ FTE/Funding Available
Date: _____	Date: _____
VERIFIED <input type="checkbox"/>	APPROVED <input type="checkbox"/>
COUNTY ADMINISTRATOR: _____	Date: _____