

## **POSSIBLE MOTION**

**I MOVE TO** amend Resolution 2019-15A as previously adopted at the May 28, 2019 Assembly meeting by changing the participation removal date on line 30 to July 31, 2019, thereby approving Resolution 2019-15A on first and final reading as amended, and authorizing the Municipal Administrator to sign Participation Agreement Amendment No.1.

Note: Due to the delay of the Sitka Community Hospital sale by one month, this previously approved Resolution needs to be amended.

CITY AND BOROUGH OF SITKA

RESOLUTION NO. 2019 – 15A

**A RESOLUTION OF THE CITY AND BOROUGH OF SITKA AMENDING THE PARTICIPATION AGREEMENT WITH THE ALASKA SUPPLEMENTAL BENEFITS SYSTEM OF ALASKA BY SITKA COMMUNITY HOSPITAL BEING REMOVED FROM PARTICIPATION IN THE SUPPLEMENTAL BENEFITS SYSTEM**

**WHEREAS,** the Sitka Community Hospital, a political subdivision of the State of Alaska, entered into a participation agreement with the Supplemental Benefits System on February 1, 1983; and

**WHEREAS,** the Sitka Community Hospital has had their employees participate in the Supplemental Benefits System through the Sitka Community Hospital payroll system; and

**WHEREAS,** the employees will no longer participate in the Supplemental Benefits System.

**NOW, THEREFORE, BE IT RESOLVED** by the Assembly of the City and Borough of Sitka, Alaska that:

The Supplemental Benefits System Participation Agreement entered into between the State of Alaska (hereafter referred to as the State) and the Sitka Community Hospital on February 1, 1983, and approved by the State on January 31, 1983 is amended effective July 31, 2019 by terminating the Sitka Community Hospital from participation in the Supplemental Benefits System.

**PASSED, APPROVED, AND ADOPTED** by the Assembly of the City and Borough of Sitka, Alaska, on this 11<sup>th</sup> day of June, 2019.

\_\_\_\_\_  
Gary L. Paxton, Mayor

ATTEST

\_\_\_\_\_  
Sara Peterson, MMC  
Municipal Clerk

1<sup>st</sup> and final reading 5/28/19  
Amended 1<sup>st</sup> and final reading 6/11/19

Sponsor: Administrator



# **SUPPLEMENTAL BENEFITS SYSTEM**

Division of Retirement and Benefits  
PO Box 110203 Juneau, AK 99811-0203  
Phone: (907) 465-4460  
Fax: (907) 465-3086

## **PARTICIPATION AGREEMENT AMENDMENT NO. 1**

The Supplemental Benefits System Participation Agreement entered into between the State of Alaska (hereafter referred to as the State) and the Sitka Community Hospital on February 1, 1983, and approved by the State on January 31, 1983 is amended effective July 31, 2019, by terminating the Sitka Community Hospital from participation in the Supplemental Benefits System.

\_\_\_\_\_  
*Authorized Representative Signature*

\_\_\_\_\_  
*Authorized Representative Name (please type/print)*

\_\_\_\_\_  
*Authorized Representative's Title*

**Approved:**

\_\_\_\_\_  
*Administrator*

\_\_\_\_\_  
*Date*