

Gaylord Community Schools  
 EMPLOYEE COMPENSATION INFORMATION

TITLE/OTHER BENEFITS	SALARIES/ WAGES	RETIREMENT (MANDATORY)	FICA (MANDATORY)	HEALTH OR C-I-L	DENTAL	VISION	LTD/STD	LIFE	EMPLOYEE COST
SUPERINTENDENT									
BPA 10,000.00	120,710.47	49,748.16	9,234.35	17,790.24	1,939.80	619.20	529.20	345.00	1,068.84
CURRICULUM									
BPA 1,200.00	112,390.25	43,208.67	8,798.67	2,625.00	1,939.80	619.20	529.20	172.56	
SCHL DIRECTION/MGT (PRINCIPAL)									
BPA 550.00	101,711.80	37,404.58	7,780.95	17,790.24	1,939.80	619.20	529.20	172.56	1,068.84
SCHL DIRECTION/MGT (PRINCIPAL)									
BPA 550.00	100,152.70	39,183.80	7,661.68	17,790.24	1,939.80	619.20	529.20	172.56	1,068.84

SALARIES AND WAGES ARE THOSE WAGES REPORTABLE AS MEDICARE WAGES ON THE 2018  
 W2 FORM ADJUSTED FOR BENEFIT RELATED ITEMS.

EMPLOYEE BENEFITS ARE THE EMPLOYER RELATED BENEFIT COSTS AND MAY INCLUDE  
 RETIREMENT, FICA, HEALTH, DENTAL, VISION, LIFE, AND DISABILITY INSURANCE,  
 BOARD PAID ANNUITIES, PERSONAL AUTO RELATED EXPENSES, CASH IN LIEU OF  
 BENEFITS AND OTHER MISCELLANEOUS BENEFITS.