

Compensation Disclosure for FY Ending 03-31-25

Position	Annual Base Salary	Employer Paid Health, Dental, and Vision Premiums*	HRA**	Mileage Allowance	Vehicle Allowance	Other
Assessor (Elected)	\$ 78,026.67	\$ 18,344.64	\$ 4,000.00	\$ 3,600.00	None	None
Highway Commissioner (Elected)	\$ 79,250.78	\$ 192.24	\$ -	\$ -	Has use of Twp Vehicle	None
Administrator (Employee)	\$ 81,770.00	\$ 122.84	\$ -	\$ 1,200.00	None	None

*Employer paid premiums for health, dental, and vision coverage are paid directly to vendor providing coverage, not to the employee or elected official. Premiums rates are as of April 1, 2024.

**HRA (Health Reimbursement Arrangement) Funds are a maximum available during a single calendar year.

- (a) Within 6 business days after an employer participating in the Illinois Municipal Retirement Fund approves a budget, that employer must post on its website the total compensation package for each employee having a total compensation package that exceeds \$75,000 per year.
- b) At least 6 days before an employer participating in the Illinois Municipal Retirement Fund approves an employee's total compensation package that is equal to or in excess of \$150,000 per year, the employer must post on its website the total compensation package for that employee.
- (c) For the purposes of this Section, "total compensation package" means payment by the employer to the employee for salary, health insurance, a housing allowance, a vehicle allowance, a clothing allowance, bonuses, loans, vacation days granted, and sick days granted.