

Notice of City Measure Election

SEL 802

rev 1/12: ORS 250.035, 250.041,
250.275, 250.285, 254.095, 254.465

City and Notice Information

Notice is hereby given on August 27, 2012, 2012, that a measure election will be held in

City of Portland

Oregon on November 6th

, 2012.

Name of City or Cities

Date of Election

The following shall be the ballot title of the measure to be submitted to the city's voters:

Caption 10 words

AMENDS CHARTER: CHANGES PROVISIONS OF FIRE POLICE DISABILITY RETIREMENT SYSTEM.

Question 20 words

Shall limited provisions of the retirement and disability system for police and fire be changed?

Summary 175 words

This measure would amend the City Charter for the Fire Police Disability Retirement System (FPDR) by:

- Clarifying the calculation of retirement benefits to include only pay a member received in the year preceding retirement.
- Changing eligibility for disability benefits for new members after completion of six consecutive months of employment as a sworn employee.
- Changing the calculation of service credit to not include post-employment service by another employer.
- Giving the Administrator, with the approval of the Board of Trustees, authority to settle claims.
- Defining service requirements for occupational disability due to heart disease and nonservice-connected disability and death benefits.
- Changing retirement benefits for part-time employees.
- Providing disability benefits on a monthly or bi-weekly basis.
- Providing interim disability benefits during the period between the application and approval of benefits.
- Clarifying language regarding occupational disability benefits.
- Changing from 10 years to 5 years the vesting period for nonservice-connected death benefits.

This amendment is expected to decrease FPDR taxpayer liabilities by \$46 Million over a 25 year period.

The following authorized city official hereby certifies the above ballot title is true and complete, which includes publication of notice and the completion of the ballot title challenge process.

Signature of Authorized City Official *not required to be notarized*

Date Signed 8/27/12 mm/dd/yy

Printed Name of Authorized City Official

Title

LaVonne Griffin-Valade
LaVonne Griffin-Valade

City Auditor