AGENDA

General Employee Retirement Committee Quarterly Meeting
City of Port Orange – City Hall
1000 City Center Circle, 2nd Floor Training Room
Monday, December 14, 2015 @ 10:00 a.m.

I. Call to Order:

Chair Kent Donahue
Vice-Chair Sonya Laney
Donnie Franklin
Council Member Scott Stiltner
Peter Ferreira
Linda Johnson
Tracey S. Riehm

II. Approval of Minutes:

a. September 28, 2015 – Quarterly Meeting

III. Participant/Public Participation

IV. Unfinished Business:

a. Vendors' Performance Review
b. Outstanding Voluntary Accounts for Retirees

V. Financials:

a. September 2015 – Dave Leonard
b. October 2015 – Dave Leonard
c. Highland Capital – Grant McMurray
d. Southeastern Advisory – Jeff Swanson

VI. New Business:

a. 2015 Audit Concerns
b. Christopher Kucera – Normal Retire Payment for Approval

VII. Consent Agenda:

For Approval:

Warrant#108

Benefits USA, Inc. (Admin Fees 10-12/2015&Postage; INV #POG081)	$ 7,592.12
Southeastern Advisory (Investment Consulting Services: INV #1503)	$ 4,752.00
Highland Capital Management (4th Qtr '15 Mgmt Fees; INV #10145)	$ 8,434.93
Integrity Fix Income Management (3rd Qtr '15 Mgmt Fees; INV #1962)	$ 3,722.75
The Boston Company (3rd Qtr '15 Mgmt Fees; INV #64541)	$ 9,179.89
David G. Leonard, ASA (Actuarial Services: INV #15-054)	$ 3,000.00
James Moore (2015 Audit INV #540515)	$ 5,000.00
Sonya Laney (Reimb. For FPPTA Trustee School Travel Expense)	$ 620.73

VIII. Distributions:

Mandatory Plan

For Approval:

Carla Wright	Total Withdrawal	$ 207.57
Ronald Ferrer	Total Withdrawal	$ 166.14
Eleanor Coyne	Total Withdrawal	$ 778.37
Stephen Edwards	Total Withdrawal	$ 20.45
Charles Garay	Total Withdrawal	$ 997.44
Amado Cotto	Total Withdrawal	$ 517.42

IX. Reports:

a. Attorney
b. Comments from Committee Members
c. Administrator
d. Correspondence

X. Next Meeting Date:

a. January 25, 2016 – Regular Meeting
b. Updated 2016 Meeting Schedules

XI. Adjournment:

Any person who desires to appeal any decision made by the General Employee Retirement Committee will need a record of the proceedings, and for such purpose he or she may need to ensure at his or her own expense for the taking and preparation of a verbatim record of all testimony and evidence of the proceedings upon which the appeal is based.

NOTE: If you are a person with a disability who needs any accommodation in order to participate in this proceeding, you are entitled, at no cost to you, to the provision of certain assistance. Please contact the City Clerk for the City of Port Orange, 1000 City Center Circle, Port Orange, Florida 32129, Telephone Number (386) 506-5563, within (2) two working days of your receipt of this notice or (5) five days prior to the meeting date; If you are hearing or voice impaired, contact the relay operator at 1-800-955-8771.

September 28, 2015 – Quarterly Meeting

Minutes

CITY OF PORT ORANGE GENERAL EMPLOYEES RETIREMENT PLAN QUARTERLY MEETING MINUTES
September 28, 2015

ROLLCALL:

The quarterly meeting of the City of Port Orange General Employees Retirement Plan was called to order by Chairperson Donahue at 10:00 a.m. on September 28, 2015 in 2nd Floor Training Room, City Hall 1000 City Center Circle, Port Orange, FL.

TRUSTEES PRESENT:

Chairperson Kent Donahue, Vice Chairperson Sonya Laney, Council Member Scott Stiltner and Donnie Franklin, Tracey S. Riehm, and Linda Johnson

ABSENT AND EXCUSED:

Peter Ferreira

OTHERS PRESENT:

Pete Prior of Benefits USA, Inc., Grant McMurray of Highland Capital, Jeff Swanson of Southeastern Advisors, Dave Leonard, Actuary, and Retiree John Shelley

PARTICIPANT/PUBLIC PARTICIPATION:

There was no public participation at this meeting.

APPROVAL OF MINUTES

August 24, 2015 – Regular Meeting

Chairperson Donahue asked the Members if they have any issues with the minutes, corrections, additions, or deletions. Member Stiltner moved to approve the minutes of August 24, 2015 Regular Meeting as written. Member Johnson seconded the motion and the motion passed.

FINANCIALS:

August, 2015 – Dave Leonard

Mr. Leonard reviewed the financials with the Board. Mr. Leonard noted the market value of the Fund is $29,243,855.51, a decrease of $1,241,935.57. Receipts for the month totaled $728,136.11 versus total disbursements of $1,219,115.50. Payments to retirees and other participants totaled $147,858.70. The balance as of August 31, 2015 was $858,016.91 in the Cash account. Mr. Leonard reported that the yield for the month is -3.99%.

Mr. Leonard noted that the Plan is experiencing a negative cash flow as the expenditures are higher than the contributions at this time. This is due partially to the partial closure of the Plan. Member Laney moved to approve the financial report. Member Franklin seconded the motion and the motion passed.

Highland Capital – Grant McMurray

Mr. Grant McMurray distributed an additional handout about the performance of the Fund.

As of June 30, 2015, the City of Port Orange General Employees Retirement Pension Fund's Highland Capital Management balanced account was valued at $7,273,565.00. For the second quarter, the Highland Capital Management balanced portfolio returned -0.49% which was 0.62% lower than the Index of 0.13%; 7.41% for Fiscal Year to Date on a cumulative basis, and 14.95% for the past five years on an annualized basis. It was noted that the asset allocation is as follows: 96.8% in Value and 3.2% in Cash/Cash Equivalents. The top three holdings by sector are as follows: Financials, 24.10% of the portfolio returned 3.50%; Info. Tech., 19.6% of the portfolio returned -6.80%; and Health Care, 16.40% of the portfolio returned 5.20%.

Mr. Grant McMurray noted that the market is based on computer trading and selling, when the market hits a certain number, the computers will initiate a buy or sell signal to the trader. Mr. McMurray noted that the market has a PE ratio of 17% and is not concerned that the market makers are saying the market is overpriced. Chairperson Donahue asked how the transition is going. Mr. McMurray reported that he is pleased with the transition and that the buying platform used by Highland Capital is a higher version than they use, but their system follows theirs very closely and it is one of the reasons why they agreed to merge with Highland Capital.

Southeastern Advisory – Jeff Swanson

Mr. Swanson reviewed the investment performance report for the period ending June 30, 2015. He reported that the second quarter of 2015 provided a wild ride for global investors with U.S. stock markets hitting record highs in May, and then pulling back dramatically in June as the Eurozone grappled with Greece's default on its crippling debt and the possibility of Greece abandoning the Euro. The U.S. economy dealt with the hangover left from an unusually punishing winter, real GDP was down slightly during the first quarter of 2015, contracting -0.2%. Economic growth slowed for two quarters in a row after a two quarter surge in 2014. Although personal consumption growth was positive, exports contracted as did state and local government spending. Private business spending dropped although inventories accumulated which could dampen a second rebound. However, consumer spending which accounts for nearly 70% of overall GDP, showed signs of renewed activity during the second quarter.

Mr. Swanson reported that the Fund portfolio value as of June 30, 2015 was $30,076,924. The Total Fund returned 0.2% for the second quarter which was 0.5% higher than the target Index of -0.3% and ranked 38% of Total Public Fund Sponsors, 5.2% for one year, and 12.9% for the past three years on an annualized basis. The asset allocation is 56.1% Domestic Equity, 17.0% Fixed Income, 9.5% International Equity, 11.8% Real Estate and 5.6% Cash. Total Domestic Equities' return was 0.6% which was 0.3% higher than the S&P 500 Index of 0.3%. Total Fixed Income returned -1.9% which was 0.2% lower than the Barclays Aggregate Index of -1.7%. Total International Equities' return was 0.5% which was 0.1% lower than the MSCI EAFE Index of 0.6%. Total Real Estate's return was 3.3% which was 0.2% higher than the NCREIF Property Index of 3.1%.

Mr. Swanson reported that the Manager Allocation is 24.3% managed by Highland Capital, 8.1% managed by Atlanta Cap, 4.6% managed by EuroPacific Growth, 5.0% managed by Vanguard Global, 11.9% managed by Principal Real Estate, 25.7% managed by Boston Company and 20.5% managed by Integrity.

Mr. Swanson suggested moving the Real Estate target to 10% from the 5% we have now. This will enhance the portfolio as it reflects against the Fixed Income. Mr. Swanson noted that Highland Capital has turned the corner on the short and near term but still digging out of a hole from the third quarter of 2011 which was negative. Mr. Leonard asked Mr. Swanson if he thought that the 7.5% is a continued objective and Mr. Swanson replied he believes it is but it is an aggressive rate due to the market. Member Laney noted that the Plan is negative due to contributions and suggests that plan lower the assumed rate of return sooner rather than later to allow for the City to budget for the increase.

UNFINISHED BUSINESS

Vendors' Performance Review – Jeff Swanson

Mr. Swanson introduced himself and the provided a brief history of the company to the Board. They were incorporate in 1986 as an independent consultant with over $5 billion assets and approximately 50 clients. Mr. Swanson reported that what makes them stand apart from their peers is that they are part of the Wilshire Cooperative, a much larger entity comprised of 350 employees and research that is available to them. Wilshire is also the consultant to CalPers, the largest public fund in the nation. Mr. Swanson noted that he is passionate about this business and wants to see his clients succeed. Mr. Swanson said their firm was hired by City of Port Orange General Employees Retirement Plan at end of 2010 through RFP process. There was only one Investment Manager, ICC Capital that managed all the Pension Fund money going back to the inception of the Plan. The Pension Fund hired seven Investment Managers, diversified the portfolio to 55% Domestic Equity, 10% investment in International Equity, 5% in Real Estate and 30% investment in Fixed Income.

Mr. Swanson said that he has been in the business for 25 years and his firm does only institutional business. They do not have any other lines of business nor do they do individual consulting. It was the consensus of the Board that they are pleased by Mr. Swanson's professional service.

Chairperson Kent Donahue asked which vendor will be the next one being reviewed. Mr. Prior said he will bring a list for discussion at October meeting.

Outstanding Mandatory and Voluntary Accounts for Retirees and Terminations
Mr. Prior reported that all the correspondences between Attorney, Administrator, and chairperson were included in today's Meeting Packets. Members said they did read all before the meeting.

Actuary Mr. Leonard provided a list for all Outstanding Mandatory and Voluntary Accounts for Retirees and Terminations. There are two parts: the first part is for non-vested Members with remaining balances for their contributions, we called Mandatory Plan; and the second part is for retirees who have a remaining balance in their Voluntary Accounts. Mr. Leonard explained that there is no fee for the Mandatory Plan and he thought $40 each year for Voluntary Accounts would suffice. Member Johnson suggested asking retirees with Voluntary Accounts with remaining balances if they want to pay the $40 fee to Pension Fund. Mr. Prior said that Pension Fund can directly deduct from their Balance.

Member Laney suggested that Pension Fund needs some legal document to those Members. After further discussion, Member Laney moved to give authority to Benefits USA to contact all Terminations who still have a remaining balance in Mandatory Plan and pay off their balance. Member Johnson seconded the motion and the motion passed. Mr. Leonard noted that they must get their correct addresses first. Mr. Prior said his office will continue to attempt to contact the participants to close out their account.

Member Laney left the meeting at 11:08 with a personal conflict.

Member Stiltner made a motion to table Voluntary Accounts issue to next meeting since Member Laney left the meeting, Member Riehm seconded the motion. The motion passed.

NEW BUSINESS:

Pension Annual Certification for 2016
Mr. Prior reported that Benefits USA will start to send out the pension verification letters for Fiscal Year 2016. It was noted that the letter contains a self addressed stamped envelope for the retiree to send back.

Paul Riley – Early Retire Payment for Approval
The Board reviewed the documents reflecting the retirement payment for Mr. Paul Riley. Member Johnson questioned that she couldn't find whether Mr. Riley's wife signed the Election to waive joint and survivor annuity or not, since Mr. Riley did choose Life Annuity. Mr. Prior reported that he should have already completed all the forms, just not posted. And this issue also not necessary for approval Mr. Riley's Pension payment. Actuary Mr. Leonard did agree with Mr. Prior. Seeing no further discussion, Member Johnson moved to approve the retirement payment for Mr. Paul Riley. Member Franklin seconded the motion and the motion passed.

CONSENT AGENDA:

For Approval:
Warrant#107

Benefits USA, Inc. (Admin Fees 09/2015; INV #POG080)	$ 2,500.00
David G. Leonard, ASA (Actuarial Services: INV #4786)	$ 1,760.00
James Loper (STMT #35 dated 8/31/15)	$ 2,829.00
FPPTA (Regis. Fee for FPPTA Trustee School for Laney)	$ 450.00

Member Johnson moved to approve Warrant #107. Member Franklin seconded the motion and the motion passed.

DISTRIBUTIONS:

Mandatory Plan
For Approval

Randy Forbes	Total Withdrawal	$ 577.26

Member Stiltner moved to approve the distribution for Mr. Forbes. Member Johnson seconded the motion and the motion passed.

Michael Leissler	Total Withdrawal	$ 2,558.15

Member Riehm moved to approve the distribution for Mr. Leissler. Member Stiltner seconded the motion and the motion passed.

REPORTS:

Administrator
Mr. Prior reported that FPPTA Trustee School is scheduled for October 4 – 7, 2015 at the Naples Grande Beach Resort, Florida: members that wish to attend please advise Benefits USA as soon as possible to register with the FPPTA.

NEXT MEETING DATE:
October 26, 2015 @ 10:00 a.m. – Regular Meeting

ADJOURNMENT:
The meeting adjourned at 12:15 p.m.

____________________________ Chairperson

__________________ Date

Unfinished Business

Vendors' Performance Review

NAME	HIRED DATE	EXPIRATION	TERM	FEE	RENEWAL DATE
Benefits USA **Administrator**	9/1/2008	None	30 Days	$2500/per month Flat Fee Guaranteed 3 yeas	9/22/2014
James Loper **Attorney**	4/21/2006	None	None	$205/per hour Based on Service provided	None
James Moore **Audit**	9/30/2014	8/30/2016	60 Days	$15,000/per year Guaranteed 2 yeas	
Salem Trust **Bank**	8/23/2004	None	None	4 basis point $15/per lump sum $3/per payment	None
Southeastern Advisory **Investment Advisor**	1/1/2011	None	90 Days	$18,000/per year Increase each year based on prior year Consumer Price Index	None
David Leonard **Actuary**	11/1/2006	9/30/2016	30 Days		3/24/2014

Unfinished Business

Outstanding Voluntary Accounts for Retirees

Proposed Standardized Interest Crediting Policy for
Voluntary Accounts for Members of the
City of Port Orange General Employees Defined Benefit Retirement Plan
(GEDBRP)

1. Participants who do not receive distributions during a Plan Year will receive an interest credit at the end of each Plan Year (i.e. September 30) equal to their beginning balance times the rate of return for the GEDBRP Trust, calculated by the administrator using the standard IRS Formula known as "2i/(a+b-i)". In this formula, "a" is the beginning of the period assets, "b" is the end of the period assets, and "i" is the income for the period, net of expenses. For this purpose, both investment and administrative expenses are used to reduce income. At no time will new contributions during the current plan year receive interest credit. This applies for all portions of this Policy Statement.

2. Participants who request a partial or complete distribution during a fiscal year will be credited with income for the period of time from the prior October 1st to the end of the month in which their request is received. The amount of interest will be calculated identically to the calculation described in paragraph 1 above, with the exception being that the income formula will take into account through the partial plan year period as described above.

3. In the event that a Participant requests a second distribution within a plan year, his remaining balance will be brought forward from the interest crediting date of his first distribution to the appropriate interest crediting date for his second distribution, taking into account the additional net gains or losses that have occurred.

4. It is anticipated that distributions under paragraphs 2 and 3 above will be brought before the Board in a timely manner and, if approved, distributed as soon as administratively feasible thereafter. Participants should be notified that the period from the time they request a distribution to the time their benefit is paid could be from 30-90 days, depending on the date their request for distribution is made and the schedule of the Board.

5. Voluntary contributions are made on a post-tax basis, whereas the income credited is taxable upon distribution. In the case of any partial plan distribution, the proportion of post-tax basis as of the date of interest crediting as defined above will apply to the amount of the partial distribution, to the extent that the partial distribution is less than the Participant's total voluntary account prior to adding contributions for the current year. If the Participant's partial plan distribution includes any new post-tax contributions made in the current plan year, then all credited income in his account will be considered to be part of the partial plan distribution, and any remaining balance will be considered to consist only of after-tax contributions.

Pete

Find Me On:
www.facebook.com/Benefits USA

BENEFITS-USA
A Third Party Administrator of
Public Pension Plans

Pete Prior
Benefits USA
954-730-2068 Office
954-730-0738 Fax

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David G. Leonard, A.S.A.
533 N. Nova Rd. - Suite 207 (note new address - eff. 7/21/14)
Ormond Beach, FL 32174
386-206-8932 (new direct line)
fax 386-310-7947 (new fax)

Notice: To the extent this communication (or any attachment) concerns tax matters, it is not intended or written to be used, and cannot be used, for the purpose of (i) avoiding tax-related penalties under the Internal Revenue Code or (ii) marketing or recommending to another party any tax-related matter addressed within. Each taxpayer should seek advice based on the individual's circumstances from an independent tax advisor.

Mei Fang

From: James Loper [jloper@loperlaw.com]
Sent: Tuesday, September 15, 2015 1:47 PM
To: 'pete@benefits-usa.org'
Cc: 'Mei Fang'; Loraine Loper
Subject: RE: port orange
Attachments: Policy for Administration & Distribution 09.15.15.docx

Pete,

This email is in response to the second paragraph of your email sent on Thursday, September 3, 2015 at 3:47 PM, concerning an administrative rule for the voluntary participant contributions accounts.

Attached is a Draft 09.15.15 of "Rules for Voluntary Participant Contributions Accounts", sent as a micro soft word document.

This draft provides for complete distribution after the September 30 immediately following the employee's separation from employment, BUT ALSO provides for continued participation after separation from employment upon written request of the separating employee with certain specified conditions. Included as one of the conditions, is that a complete or partial distribution would not be made until after September 30 (since the net investment return of the plan is determined as of September 30 of each year). This could be changed to the end of each quarter, December 31,March 31, June 30, and September 30, since it is my understanding that the plan gets quarterly investment reports. Distributions could also be made at the end of each month, but this may require additional calculations that are not already being provided.

Once a rule is adopted, various forms would need to be developed and adopted, including the written request form that advises the employee of the information contained in paragraphs 4.a.,b.,c., and d.

The administrative fee could also include the cost of sending annual account statements to the separated employees who elect continued participation--- leaving their account in the defined benefit plan after separation from employment.

I have reviewed the actuary's proposed standardized interest crediting policy, but I have not included such in this draft until it is determined whether withdrawals will be allowed on a monthly, quarterly, or yearly basis.

I welcome input from you, the trustees and others.

I am leaving on a short vacation beginning on Friday, September 25, 2015 and not returning until Monday evening, October 5, 2015. Therefore, if you or any other person wishes to discuss this draft with me further, please call at least a few days before Friday, September 25, 2015, in order that I would have additional time to make any changes deemed necessary before the meeting of the retirement committee on Monday, September 28, 2015.

If you have any directions or further requests, please advise.

James B. Loper
Attorney at Law
14502 N. Dale Mabry Hwy.
Suite 200
Tampa, Florida 33618
Phone: (813) 964-0577 ext. 3
Cell: (813) 787-4410

DRAFT

CITY OF PORT ORANGE GENERAL EMPLOYEES DEFINED BENEFIT RETIREMENT PLAN
RULES FOR
VOLUNTARY PARTICIPANT CONTRIBUTIONS ACCOUNTS

1. Section 54-148(b), "Voluntary participant contributions" of the Plan, in part, provides:

   "Each employee shall have the right to elect to make voluntary employee contributions up to ten percent of his basic compensation.";

   "The voluntary employee contributions shall be deposited to a voluntary employee contribution account.";

   "As of September 30 of each plan year the amount in the voluntary employee contribution account shall be adjusted first for any requested refunds and the remaining balance shall be credited with the calculated trust fund earnings. Any voluntary contributions made during the plan year shall then be added to the voluntary employee contribution account."; and

   "An employee may request a refund from his account an amount not exceeding the total of his voluntary contributions with investment gains and losses at the time of such request. This request shall be made to the retirement committee on a form supplied by the retirement committee."

2. Section 54-169(b), "Authority of the retirement committee", in part, provides:

   "(1) The retirement committee shall have the authority to make such rules and regulations and to take such action as may be necessary to carry out the provisions of the plan..."

3. As soon as administratively possible after the September 30 immediately following the employee's separation from employment as a general employee with the City of Port Orange, the employee's voluntary employee contribution account shall be distributed in a single lump sum amount, either through a cash payment or direct rollover, less any taxes required to be withheld and remitted to the Internal Revenue Service. All lump-sum distributions shall be made subject to and in accordance with all applicable provisions of the Internal Revenue Code. A Special Tax Notice Regarding Plan Payments shall be furnished to the employee separating from employment as a general employee of the City of Port Orange as soon as administratively possible after the retirement committee/board of trustees learns of such separation from employment.

4. Provided however, upon written request to the retirement committee/board of trustees and subject to the approval of the retirement committee/board of trustees, a participating

employee who is separating from employment as a general employee with the City of Port Orange may elect to have all or some of the amount in the participant's voluntary employee contribution account remain in the Plan, subject to the following conditions:

a. Upon separation from employment as a general employee with the City of Port Orange, the participant will no longer be allowed to deposit additional voluntary employee contributions in the Plan.

b. There will be an annual administrative fee of _____% charged on the amount of the voluntary employee contribution account as of September 30 of each plan year, for the expenses of making the annual calculation of the amount in the voluntary employee contribution account as of September 30 of each year, for processing requests for distributions, etc.

c. In the written request, the separating employee acknowledges in writing that he/she understands that: (1) The written investment policy of the defined benefit plan(asset allocation, assumed risk, long-term investment goals, etc.) may not be consistent with his/her financial circumstances including age of the separated employee, cash needs, etc.; (2) As of September 30 of each plan year, the voluntary participant contribution account will be credited with gains or debited with losses of the net investment return of the defined benefit plan.

d. Upon written request of the separated participating employee, a complete lump sum distribution or partial lump-sum distributions shall be made as soon as administratively possible after September 30 once approved by the retirement committee/board of trustees in a single lump sum amount, either through a cash payment or direct rollover, less any taxes required to be withheld and remitted to the Internal Revenue Service.

e. All lump sum distributions, including required minimum distributions (RMD), shall be made subject to and in accordance with all applicable provisions of the Internal Revenue Code.

f. A Special Tax Notice Regarding Plan Payments shall be furnished to the participant requesting distribution before any lump sum distribution is made.

g. The separating employee requesting continued participation agrees to notify the retirement committee/board of trustees in writing of his/her current post office address and each change of post office address.

h. The requesting separating employee shall on a form provided by the retirement committee/board of trustees designate a beneficiary or beneficiaries to receive the balance in the separated employee's voluntary participant contribution account upon the death of the separated employee.

Financials

September 2015 - Dave Leonard

City of Port Orange
General Employees Defined Benefit Retirement Plan

2014/2015 Cost and Market Summary - as of SEPTEMBER 30, 2015

Date	Cost Value Including Cash*	Market Value Including Cash*	Market value over Cost value
10/01/2014	25,603,729.44	28,983,214.01	$3,379,484.57
10/31/2014	26,790,954.02	29,543,925.34	$2,752,971.32
11/30/2014	26,726,264.98	29,844,166.10	$3,117,901.12
12/31/2014	26,738,289.17	29,823,969.07	$3,085,679.90
01/31/2015	26,736,923.24	29,418,412.47	$2,681,489.23
02/28/2015	26,758,560.91	30,445,416.05	$3,686,855.14
03/31/2015	26,759,051.37	30,269,892.99	$3,510,841.62
04/30/2015	26,769,690.19	30,203,419.66	$3,433,729.47
05/31/2015	26,844,577.42	30,395,235.24	$3,550,657.82
06/30/2015	26,993,718.93	30,077,580.53	$3,083,861.60
07/31/2015	27,087,157.50	30,524,936.86	$3,437,779.36
08/31/2015	27,048,011.72	29,243,855.51	$2,195,843.79
09/30/2015	27,070,787.30	28,806,017.49	$1,735,230.19

Change in Market Value of Plan Assets (as of September 30, 2015):

Increase from 10/01/14	($177,196.52)	- annual
Increase from 9/01/15	($460,613.60)	- monthly

* Includes all accrued interest and dividends.

Cash Accounts - Per Salem Trust

Balance as of September 1, 2015			**$858,016.91**
Receipts:			
City Contribution		$50,375.06	
Mandatory EE Contributions		29,748.96	
Voluntary EE Contributions		2,365.20	
Sale-Securities (Cost Value)		609,680.74	
Gain (Loss) Sale of Securities		35,773.61	
Dividends		33,936.23	
Interest & Mutual Fund Reinv.		12,387.24	
Other - Litigation Proceedings		0.00	
Total Receipts			$774,267.04
Disbursements:			
Securities Purchased - Equity (incl. Unit Trusts)		($260,841.09)	
Securities Purchased - US Govt. Oblig.		0.00	
Securities Purchased - Mortgage Backed Sec.		0.00	
Securities Purchased - Principal Real Estate Acct.		0.00	
Securities Purchased - Municipal		0.00	
Securities Purchased - Corp. & Foreign Bond		(302,103.15)	
Payments to Retirees *- See page 3 for a listing of all monthly payments.*		($149,468.60)	
Payments to other Participants		$-0.00	
	$0.00		
	0.00		
	0.00		
	0.00		
	0.00		
	0.00		
Expenses		$-0.00	
Admin/Actuarial Fees	$0.00		
Investment/Monitor Fees	0.00		
Custodian Fees/ Commissions	0.00		
Legal Fees	0.00		
Misc - Trustee school	0.00		
Total Disbursements			(712,412.84)
Balance as of September 30, 2015			**$919,871.11**

See pg. 5 for breakdown of cash holdings by account.

City of Port Orange
General Employees Defined Benefit Retirement Plan

Monthly Benefit Payments to Retired, Deceased and Disabled Participants - September, 2015

Barnhart, Betty	$3,758.64	Norris, Annie (benef.)	$2,155.45
Blackey, William	492.27	Oddie, William	2,726.69
Bliven, Thomas	1,184.26	Palmer, Roberta	3,673.00
Bowey, Janet	169.24	Parker, Kenneth	5,508.77
Breaks, Robert	708.87	Parsons, Janice	3,909.02
Cady, Anna	2,808.30	Peace, Michael	3,140.90
Chamberlain, Kathleen	803.75	Pike, Warren & DeAnn	3,721.69
Conforti, James	611.91	Potts, Wilford J.	1,040.28
Cooper, Michael	1,453.46	Redfield, Rosemary	593.38
Day, Robert	2,633.89	Roberts, Veronica	1,015.38
Dearborn, Dennis	1,409.73	Rorem, Steve	1,648.52
Ellis, Alberta	893.52	Schulz, William (benef.)	739.04
Findley, Cindy	423.80	Sheffield, Henrica	2,288.10
Foster, James	4,032.48	Shelley, John	4,595.68
Franklin, James	3,805.31	Sheridan, Linda	2,173.28
Fuhrman, Frank	3,320.02	Sheward, Thomas	2,202.38
Griffith, Fred*	**4,543.01**	Shroyer, Terry	1,203.68
Grimm, Sandra	1,428.58	Simmons, Thomas	2,507.28
Groom, Rebecca	2,457.09	Skeens, Sandra (benef.)	1,763.20
Groom, William	2,253.96	Smith, Glenn	1,906.95
Gurnee, Stella	1,321.01	Sneddon, Margaret	1,904.74
Hacker, Lea Ann	395.50	Steinebach, Donna	4,907.78
Hammons, Elizabeth	1,596.60	Stuhr, Donald	1,249.53
Hopkins-Peace, Krystal	1,586.62	Sutton, Robert	596.47
Huntt, Steven	2,793.36	Taylor, Gerald	1,187.68
Kelly, Margaret	832.60	Termini, Jimmy (MPP)	867.00
Kelly, Shirley	3,469.66	Treon, Shirley	2,416.28
Kincaid, Kathyrn	1,377.13	Turner, Larry	1,463.71
Klimek, Frank	1,802.47	Van Arsdale, Wayne	491.09
Koch, Michael	3,530.36	Walker, Glenn	3,477.10
Kosuta, Christopher	1,851.28	Walker, Russell	518.96
Leftwich, Glenda	1,033.35	Walsh, Thomas (MPP)**	0.00
Levine, Steven	2,579.16	Whitmarsh, Dorothy	1,415.50
MacDuffie, Ray	625.21	Wilson, Judith K.	2,506.31
May, Roger (ben Randall M.)	775.98	Wilson, Stephen	157.09
McCurry, Dennis	2,517.57	Wolf, Steven	2,679.15
McNulty, John	980.89	Zdzinicki, Robert	399.90
Milholen, Ellen	3,050.53	Zurawski, Marceda	1,455.77
Miller, Lee	505.28		
Monning, Linda (benef.)	1,445.22		
Total Payments for Monthly Benefits:	$149,468.60	** Payment held awaiting confirmation.	
Total in Pay Status: (includes 1 MPP participant)	77	*- excludes Walsh ($0.00)*	

10/13/2015

** New retiree this month.*

Cash Account Reconciliation - continued

Securities Sold - September 2015

	Gain and Loss Summary	Cost Value	Proceeds	Gain(Loss)
HCC	United Healthcare 700 sh.	$57,566.67	$84,841.65	$27,274.98
		0.00	0.00	0.00
		0.00	0.00	0.00
		0.00	0.00	0.00
		0.00	0.00	0.00
		0.00	0.00	0.00
BOST	Coca Cola 2276 sh	98,583.83	111,586.95	13,003.12
	Precision Castparts Co. 292 sh	63,553.79	66,984.68	3,430.89
	Regeneration Pharm. 25 sh	9,823.92	11,610.53	1,786.61
	Allergran Plc. 50 sh	12,112.04	13,333.04	1,221.00
	Mallinckrodt Plc 86 sh	11,039.40	7,134.04	(3,905.36)
		0.00	0.00	0.00
		0.00	0.00	0.00
		0.00	0.00	0.00
		0.00	0.00	0.00
		0.00	0.00	0.00
Integrity	US Treas. 3.125%, 8/44 100k	111,013.28	103,409.98	(7,603.30)
	FNMA 3.5%, 8/26, 1.40891k	1,483.76	1,408.91	(74.85)
	FNMA 3.0%, 10/21, 1.11525k	1,162.30	1,115.25	(47.05)
	FNMA 4.5%, 8/30, 1.89403k	2,062.13	1,894.03	(168.10)
	FNMA 3.0%, 9/22, 7.6645k	8,124.37	7,664.50	(459.87)
	FNMA 3.5%, 8/25, 4.90404k	5,188.32	4,904.04	(284.28)
	GNMA 3.0%, 11/26, 1.98431k	2,068.33	1,984.31	(84.02)
	GNMA 4.5%, 10/24, 3.53541k	3,831.50	3,535.41	(296.09)
	Airgas 3.25%, 10/15 87k	87,343.65	87,000.00	(343.65)
	GE Cap Corp 5.3%, 2/21, 111k	124,852.45	127,908.63	3,056.18
	Microsoft Co. 3.5%, 2/35 10k	9,871.00	9,138.40	(732.60)
		0.00	0.00	0.00
		0.00	0.00	0.00
		0.00	0.00	0.00
Mut FD.		0.00	0.00	0.00
		0.00	0.00	0.00
	Total Sales for Month	$609,680.74	$645,454.35	$35,773.61

MM sold for cash:	$674,492.91
Less CSM	0.00
Total Assets Disposed of: (per Salem)	$1,319,947.26

Securities Purchased

See attached pages from the various Salem Trust Reports.

Cash Account Reconciliation - continued

Cash Account Recap	beg. of month September 1, 2015	end of month Sept. 30, 2015
Cash - Receipt/Disbursement Acct.	$350,821.64	$400,055.40
Cash - HCC Equity Acct.	313,970.45	210,811.16
- Cash due from/(to) Broker (HCC)	80,780.41	0.00
Cash - Boston Company Acct.	321,390.02	261,013.22
- Cash due from/(to) Broker (Bos.)	81,889.27	(22,254.11)
Cash - Mutual Fund Acct.	20.29	20.29
Cash - CS McKee Acct.	0.00	0.00
Cash - Integrity Fixed Acct.	308,151.57	44,118.70
- Cash due from/(to) Broker (Integ).	(108,027.35)	26,106.45
Total Cash	$1,348,996.30	$919,871.11

City of Port Orange
General Employees Defined Benefit Retirement Plan

Asset Recap as of September 30, 2015

		Cost Value	*Market Value*
CASH	All accounts combined	$919,871.11	$919,871.11
BONDS	US Government Obligations	$904,501.96	$933,994.50
	Mortgage Backed Securities	1,073,881.34	1,068,973.73
	Collateralized Mtg. Obligations	66,713.13	68,642.52
	Municipal Obligations	427,973.80	430,951.35
	Corp. & Foreign Bonds	3,191,348.64	3,112,294.08
	Total Fixed Income (Integrity)	$5,664,418.87	$5,614,856.18
EQUITIES		$13,010,699.32	$13,638,839.74
INT'L EQUITY MUTUAL FUNDS		$2,207,999.48	$2,608,135.67
REAL ESTATE TRUST ACCOUNT (Prin.)		$3,200,000.00	$3,694,053.98
C.S. McKEE FIXED INCOME MUT. FUND		$0.00	$0.00
FLORIDA MUNI. INVEST. TRUST		$2,000,000.00	$2,262,462.29
TOTALS BEFORE ACCRUALS		$27,002,988.78	$28,738,218.97
	Accrued Dividends	9,597.37	9,597.37
	Accrued Interest	58,201.15	58,201.15
	Other Accrual - Mut. Fund Acct.	0.00	0.00
TOTAL Acct. VALUE as of Sept. 30, 2015		**$27,070,787.30**	**$28,806,017.49**
	Receipt/Disb Acct.	*$400,055.40*	*$400,055.40*
	HCC Account	*6,450,092.82*	*6,753,851.96*
	Boston Company	*7,019,774.14*	*7,344,155.42*
	Mutual Fund Account - Int.	*2,208,019.77*	*2,608,155.96*
	Principal Real Estate Acct.	*3,200,000.00*	*3,694,053.98*
	CSM Account	*0.00*	*0.00*
	Florida Municipal Invst. Trust	*2,000,000.00*	*2,262,462.29*
	Integrity Financial Acct.	*5,792,845.17*	*5,743,282.48*
	Total Account Check	*$27,070,787.30*	*$28,806,017.49*

Cost and Market Value Reconciliation as of September 30, 2015

	Cost Value	*Market Value*
Values as of September 1, 2015	$27,048,011.72	$29,243,855.51
Contributions	82,489.22	82,489.22
Income Receipts	82,097.08	82,097.08
Change in Accruals	7,657.88	7,657.88
Benefit Payments	(149,468.60)	(149,468.60)
Admin. and Invest. Expenses	0.00	0.00
Unrealized Gain / (Loss)	0.00	(460,613.60)
Adjust to Balance	0.00	0.00
Values as of Sept. 30, 2015	**$27,070,787.30**	**$28,806,017.49**
Yield for the month (net of admin and invest. expenses)	0.33%	-1.27%

City of Port Orange
General Employees Defined Benefit Retirement Plan

Monthly, Quarterly and Year-to-date Review of Investment Performance - 9/30/2015

	Fiscal Year	4th Quarter	Current Month
Start	10/01/2014	07/01/2015	
End	09/30/2015	09/30/2015	September, 2015
Market Value - Start	$28,983,214.01	30,077,580.53	29,243,855.51
Contributions			
- City	673,300.09	166,921.53	50,375.06
- Mandatory 7.5%	397,523.14	98,575.41	29,748.96
- Voluntary EE	41,486.20	9,065.07	2,365.20
Other Income	1,224.54	0.00	0.00
Interest	175,426.35	37,892.56	12,387.24
Dividends	284,279.37	62,721.49	33,936.23
Realized Gains/(Losses)	1,982,428.69	170,402.06	35,773.61
Increase/(Decrease) in Unrealized Appreciation	(1,644,254.38)	(1,348,631.41)	(460,613.60)
Prior Accrued Interest	(49,861.14)	(53,428.50)	(60,140.64)
Current Accrued Interest	67,798.52	67,798.52	67,798.52
Payments to Participants	(1,908,897.08)	(439,772.94)	(149,468.60)
Administrative Expenses	(77,956.56)	(10,438.18)	0.00
Investment Expenses	(119,694.26)	(32,668.65)	0.00
Market Value - End	$28,806,017.49	$28,806,017.49	$28,806,017.49
Yield per 2i/(a+b-i)	2.1668%	-3.6885%	-1.2696%
i	*619,391.13*	*(1,106,352.11)*	*(370,858.64)*
2i	*1,238,782.26*	*(2,212,704.22)*	*(741,717.28)*
a+b-i	*57,169,840.37*	*59,989,950.13*	*58,420,731.64*
Contributions for period:	1,112,309.43	274,562.01	82,489.22
Bens/Exp. for period:	(2,106,547.90)	(482,879.77)	(149,468.60)
Net Cash Flow before income: (Vol. cons/ benefits included)	(994,238.47)	(208,317.76)	(66,979.38)

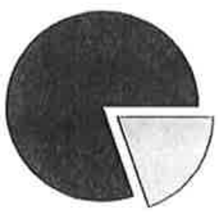
ST
SALEM TRUST

ACCOUNT STATEMENT-508

Statement Period 09/01/2015 through 09/30/2015
Account Number 3040001020
SALEM TRUST COMPANY
AS CUSTODIAN FOR THE
CITY OF PORT ORANGE GENERAL
EMPLOYEES RETIREMENT SYSTEM
BOSTON COMPANY

Schedule Of Purchases

Purchase Allocation



80.4%	COMMON STOCK	260,841.09
19.6%	SHORT TERM INVESTMENTS	63,626.63
100.0%	Total	324,467.72

Purchase Schedule

TRADE DATE	SETTLMT DATE	DESCRIPTION	UNITS	COST
SHORT TERM INVESTMENTS				
		CUSIP # 38141W315 GOLDMAN SACHS TREASURY OBLIGATIONS FUND-ADM		
		TOTAL ACTIVITY FROM 09/01/2015 TO 09/30/2015		
		PURCHASED 63,626.63 GOLDMAN SACHS TREASURY OBLIGATIONS FUND-ADM ON 09/30/2015 AT 1.00	63,626.63	63,626.63
TOTAL			63,626.63	63,626.63
TOTAL SHORT TERM INVESTMENTS			63,626.63	63,626.63

Statement Period 09/01/2015 through 09/30/2015
Account Number 3040001020
SALEM TRUST COMPANY
AS CUSTODIAN FOR THE
CITY OF PORT ORANGE GENERAL
EMPLOYEES RETIREMENT SYSTEM
BOSTON COMPANY

Schedule Of Purchases

TRADE DATE	SETTLMT DATE	DESCRIPTION	UNITS	COST
COMMON STOCK				
	CUSIP # 00164V103 AMC NETWORKS-A			
09/17/2015	09/22/2015	PURCHASED 29 SHS AMC NETWORKS-A ON 09/17/2015 AT 75.6803 THRU MORGAN STANLEY DEAN WITTER COMMISSIONS PAID 0.25	29	2,194.98
09/18/2015	09/23/2015	PURCHASED 77 SHS AMC NETWORKS-A ON 09/18/2015 AT 75.6894 THRU MORGAN STANLEY DEAN WITTER COMMISSIONS PAID 0.65	77	5,828.73
	TOTAL		106	8,023.71
	CUSIP # 023135106 AMAZON.COM INC			
09/17/2015	09/22/2015	PURCHASED 36 SHS AMAZON.COM INC ON 09/17/2015 AT 538.9905 THRU JEFFRIES AND COMPANY INC. COMMISSIONS PAID 0.31	36	19,403.97
	TOTAL		36	19,403.97
	CUSIP # 037833100 APPLE INC			
09/30/2015	10/05/2015	PURCHASED 184 SHS APPLE INC ON 09/30/2015 AT 109.42 THRU MORGAN STANLEY DEAN WITTER COMMISSIONS PAID 1.56	184	20,134.84
	TOTAL		184	20,134.84
	CUSIP # 235851102 DANAHER CORP			
09/09/2015	09/14/2015	PURCHASED 127 SHS DANAHER CORP ON 09/09/2015 AT 87.7316 THRU MORGAN STANLEY DEAN WITTER COMMISSIONS PAID 1.08	127	11,142.99

Schedule Of Purchases

TRADE DATE	SETTLMT DATE	DESCRIPTION	UNITS	COST
09/10/2015	09/15/2015	PURCHASED 128 SHS DANAHER CORP ON 09/10/2015 AT 86 194 THRU MORGAN STANLEY DEAN WITTER COMMISSIONS PAID 1 09	128	11,033 92
TOTAL			255	22,176 91
CUSIP # 30303M102 FACEBOOK INC-A				
09/17/2015	09/22/2015	PURCHASED 206 SHS FACEBOOK INC-A ON 09/17/2015 AT 94.6174 THRU MORGAN STANLEY DEAN WITTER COMMISSIONS PAID 1 75	206	19,492.93
TOTAL			206	19,492 93
CUSIP # 31428X106 FEDEX CORP CORPORATION				
09/08/2015	09/11/2015	PURCHASED 96 SHS FEDEX CORP CORPORATION ON 09/08/2015 AT 153.0292 THRU MORGAN STANLEY DEAN WITTER COMMISSIONS PAID 3.84	96	14,694.64
TOTAL			96	14,694 64
CUSIP # 410345102 HANESBRANDS INC				
09/17/2015	09/22/2015	PURCHASED 241 SHS HANESBRANDS INC ON 09/17/2015 AT 30.8889 THRU FRIEDMAN BILLINGS COMMISSIONS PAID 9.64	241	7,453 86
TOTAL			241	7,453 86
CUSIP # 438516106 HONEYWELL INTERNATIONAL INC				
09/09/2015	09/14/2015	PURCHASED 114 SHS HONEYWELL INTERNATIONAL INC ON 09/09/2015 AT 100.3449 THRU BT ALEX BROWN INC COMMISSIONS PAID 4.56	114	11,443.88

ST
SALEM TRUST

ACCOUNT STATEMENT-508

Statement Period 09/01/2015 through 09/30/2015
Account Number 3040001020
SALEM TRUST COMPANY
AS CUSTODIAN FOR THE
CITY OF PORT ORANGE GENERAL
EMPLOYEES RETIREMENT SYSTEM
BOSTON COMPANY

Schedule Of Purchases

TRADE DATE	SETTLMT DATE	DESCRIPTION	UNITS	COST
09/10/2015	09/15/2015	PURCHASED 114 SHS HONEYWELL INTERNATIONAL INC ON 09/10/2015 AT 99.5688 THRU BT ALEX BROWN INC COMMISSIONS PAID 4.56	114	11,355.40
	TOTAL		228	22,799.28
	CUSIP # 580135101 MCDONALDS CORP			
09/28/2015	10/01/2015	PURCHASED 166 SHS MCDONALDS CORP ON 09/28/2015 AT 96.9187 THRU BEAR STEARNS AND CO COMMISSIONS PAID 6.64	166	16,095.14
	TOTAL		166	16,095.14
	CUSIP # 60871R209 MOLSON COORS BREWING CO-B			
09/11/2015	09/16/2015	PURCHASED 22 SHS MOLSON COORS BREWING CO-B ON 09/11/2015 AT 68.807 THRU LIQUIDNET INC COMMISSIONS PAID 0.33	22	1,514.08
09/11/2015	09/16/2015	PURCHASED 99 SHS MOLSON COORS BREWING CO-B ON 09/11/2015 AT 69.1174 THRU MORGAN STANLEY DEAN WITTER COMMISSIONS PAID 0.84	99	6,843.46
09/14/2015	09/17/2015	PURCHASED 317 SHS MOLSON COORS BREWING CO-B ON 09/14/2015 AT 69.1714 THRU MORGAN STANLEY DEAN WITTER COMMISSIONS PAID 12.68	317	21,940.01
09/15/2015	09/18/2015	PURCHASED 285 SHS MOLSON COORS BREWING CO-B ON 09/15/2015 AT 71.9695 THRU MORGAN STANLEY DEAN WITTER COMMISSIONS PAID 11.40	285	20,522.71
09/15/2015	09/18/2015	PURCHASED 97 SHS MOLSON COORS BREWING CO-B ON 09/15/2015 AT 70.5977 THRU JEFFRIES AND COMPANY INC. COMMISSIONS PAID 0.82	97	6,848.80

Statement Period 09/01/2015 through 09/30/2015
Account Number 3040001020
SALEM TRUST COMPANY
AS CUSTODIAN FOR THE
CITY OF PORT ORANGE GENERAL
EMPLOYEES RETIREMENT SYSTEM
BOSTON COMPANY

Schedule Of Purchases

TRADE DATE	SETTLMT DATE	DESCRIPTION	UNITS	COST
09/15/2015	09/18/2015	PURCHASED 21 SHS MOLSON COORS BREWING CO-B ON 09/15/2015 AT 70 805 THRU LIQUIDNET INC COMMISSIONS PAID 0 32	21	1,487 23
TOTAL			841	59,156 29
CUSIP # 848637104 SPLUNK INC				
09/30/2015	10/05/2015	PURCHASED 200 SHS SPLUNK INC ON 09/30/2015 AT 54.83 THRU MORGAN STANLEY DEAN WITTER COMMISSIONS PAID 1 70	200	10,967 70
TOTAL			200	10,967 70
CUSIP # 913017109 UNITED TECHNOLOGIES CORP				
09/10/2015	09/15/2015	PURCHASED 87 SHS UNITED TECHNOLOGIES CORP ON 09/10/2015 AT 91.485 THRU MORGAN STANLEY DEAN WITTER COMMISSIONS PAID 0 74	87	7,959 94
TOTAL			87	7,959.94
CUSIP # 91324P102 UNITEDHEALTH GROUP INC				
09/08/2015	09/11/2015	PURCHASED 46 SHS UNITEDHEALTH GROUP INC ON 09/08/2015 AT 115.9607 THRU MORGAN STANLEY DEAN WITTER COMMISSIONS PAID 1 84	46	5,336 03
09/08/2015	09/11/2015	PURCHASED 98 SHS UNITEDHEALTH GROUP INC ON 09/08/2015 AT 114.7045 THRU MORGAN STANLEY DEAN WITTER COMMISSIONS PAID 0 83	98	11,241 87

Statement Period	09/01/2015 through 09/30/2015
Account Number	3040001020
	SALEM TRUST COMPANY AS CUSTODIAN FOR THE CITY OF PORT ORANGE GENERAL EMPLOYEES RETIREMENT SYSTEM BOSTON COMPANY

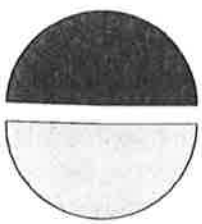
Schedule Of Purchases

TRADE DATE	SETTLMT DATE	DESCRIPTION	UNITS	COST
09/17/2015	09/22/2015	PURCHASED 129 SHS UNITEDHEALTH GROUP INC ON 09/17/2015 AT 123.2467 THRU BEAR STEARNS AND CO COMMISSIONS PAID 5.16	129	15,903.98
TOTAL			273	32,461.85
TOTAL COMMON STOCK			2,919	260,041.09
TOTAL PURCHASES				324,467.72

Statement Period 09/01/2015 through 09/30/2015
Account Number 3040069421
SALEM TRUST COMPANY
AS CUSTODIAN FOR THE
CITY OF PORT ORANGE GENERAL
EMPLOYEES RETIREMENT SYSTEM
INTEGRITY FIXED INCOME

Schedule Of Purchases

Purchase Allocation



49.5%	CORPORATE BONDS	302,103 15
50.5%	SHORT TERM INVESTMENTS	307,799.03
100 0%	Total	609,902 18

Purchase Schedule

TRADE DATE	SETTLMT DATE	DESCRIPTION	UNITS	COST
SHORT TERM INVESTMENTS				
		CUSIP # 38141W315 GOLDMAN SACHS TREASURY OBLIGATIONS FUND-ADM		
		TOTAL ACTIVITY FROM 09/01/2015 TO 09/30/2015		
		PURCHASED 307,799 03 GOLDMAN SACHS TREASURY OBLIGATIONS FUND-ADM ON 09/30/2015 AT 1.00	307,799.03	307,799.03
		TOTAL	307,799.03	307,799.03
TOTAL SHORT TERM INVESTMENTS			307,799 03	307,799 03

Statement Period 09/01/2015 through 09/30/2015
Account Number 3040069421
SALEM TRUST COMPANY
AS CUSTODIAN FOR THE
CITY OF PORT ORANGE GENERAL
EMPLOYEES RETIREMENT SYSTEM
INTEGRITY FIXED INCOME

Schedule Of Purchases

TRADE DATE	SETTLMT DATE	DESCRIPTION	UNITS	COST
CORPORATE BONDS				
	CUSIP # 026074AA2 AMERICAN FINANCIAL GROUP NON CALLABLE DTD 06/17/2009 9 875% 06/15/2019			
09/02/2015	09/08/2015	PURCHASED 14,000 UNITS AMERICAN FINANCIAL GROUP NON CALLABLE DTD 06/17/2009 9 875% 06/15/2019 ON 09/02/2015 AT 124 65 THRU MORGAN STANLEY DW	14,000	17,451 00
	TOTAL		14,000	17,451 00
	CUSIP # 12626PAJ2 CRH AMERICA INC CRHID 8 125% 07/15/2018			
09/21/2015	09/24/2015	PURCHASED 50,000 UNITS CRH AMERICA INC CRHID 8 125% 07/15/2018 ON 09/21/2015 AT 116 328 THRU JEFFRIES AND COMPANY INC	50,000	58,164 00
	TOTAL		50,000	58,164 00
	CUSIP # 375558BB8 GILEAD SCIENCES INC GILD 2 55% 09/01/2020			
09/10/2015	09/15/2015	PURCHASED 90,000 UNITS GILEAD SCIENCES INC GILD 2.55% 09/01/2020 ON 09/10/2015 AT 99.908 THRU MORGAN STANLEY DEAN WITTER	90,000	89,917.20
	TOTAL		90,000	89,917.20

Statement Period	09/01/2015 through 09/30/2015
Account Number	3040069421
	SALEM TRUST COMPANY AS CUSTODIAN FOR THE CITY OF PORT ORANGE GENERAL EMPLOYEES RETIREMENT SYSTEM INTEGRITY FIXED INCOME

Schedule Of Purchases

TRADE DATE	SETTLMT DATE	DESCRIPTION	UNITS	COST
		CUSIP # 38141GFG4 GOLDMAN SACHS GROUP INC NON CALLABLE DTD 01/18/2008 5 95% 01/18/2018		
09/16/2015	09/21/2015	PURCHASED 10,000 UNITS GOLDMAN SACHS GROUP INC NON CALLABLE DTD 01/18/2008 5 95% 01/18/2018 ON 09/16/2015 AT 108 964 THRU 80703	10,000	10,896.40
		TOTAL	10,000	10,896 40
		CUSIP # 637432CT0 NATIONAL RURAL UTILITIES MEDIUM TERM NOTE NON CALLABLE DTD 03/07/2002 8% 03/01/2032		
09/02/2015	09/08/2015	PURCHASED 5,000 UNITS NATIONAL RURAL UTILITIES MEDIUM TERM NOTE NON CALLABLE DTD 03/07/2002 8% 03/01/2032 ON 09/02/2015 AT 139.58 THRU FIRST CLEARING/WHEAT	5,000	6,979 00
		TOTAL	5,000	6,979 00
		CUSIP # 637432LR4 NATIONAL RURAL UTIL COOP NON CALLABLE DTD 10/30/2008 10.375% 11/01/2018		
09/21/2015	09/24/2015	PURCHASED 20,000 UNITS NATIONAL RURAL UTIL COOP NON CALLABLE DTD 10/30/2008 10 375% 11/01/2018 ON 09/21/2015 AT 125.015 THRU MORGAN STANLEY DW	20,000	25,003.00
		TOTAL	20,000	25,003 00
		CUSIP # 74251VAD4 PRINCIPAL FINANCIAL GROUP INC NON CALLABLE DTD 05/21/2009 8 875% 05/15/2019		

Statement Period	09/01/2015 through 09/30/2015
Account Number	3040069421 SALEM TRUST COMPANY AS CUSTODIAN FOR THE CITY OF PORT ORANGE GENERAL EMPLOYEES RETIREMENT SYSTEM INTEGRITY FIXED INCOME

Schedule Of Purchases

TRADE DATE	SETTLMT DATE	DESCRIPTION	UNITS	COST
09/16/2015	09/21/2015	PURCHASED 15,000 UNITS PRINCIPAL FINANCIAL GROUP INC NON CALLABLE DTD 05/21/2009 8 875% 05/15/2019 ON 09/16/2015 AT 121 647 THRU BAIRD, ROBERT W	15,000	18,247 05
TOTAL			15,000	18,247 05
CUSIP # 743062AD6 PROVIDENT COMPANIES INC 7% 07/15/2018				
09/01/2015	09/04/2015	PURCHASED 54,000 UNITS PROVIDENT COMPANIES INC 7% 07/15/2018 ON 09/01/2015 AT 112 15 THRU MILLENIUM ADVISOR	54,000	60,561 00
TOTAL			54,000	60,561.00
CUSIP # 78355HJU4 RYDER SYSTEM INC NOTE CALLABLE DTD 02/26/2013 2.35% 02/26/2019-2019				
09/16/2015	09/21/2015	PURCHASED 15,000 UNITS RYDER SYSTEM INC NOTE CALLABLE DTD 02/26/2013 2.35% 02/26/2019-2019 ON 09/16/2015 AT 99 23 THRU FIRST SOUTHWEST CO	15,000	14,884 50
TOTAL			15,000	14,884 50
TOTAL CORPORATE BONDS			273,000	302,103 15
TOTAL PURCHASES				609,902 18

Financials

October 2015 - Dave Leonard

City of Port Orange
General Employees Defined Benefit Retirement Plan

2015/2016 Cost and Market Summary - as of OCTOBER 31, 2015

Date	Cost Value Including Cash*	Market Value Including Cash*	Market value over Cost value
10/01/2015	27,070,787.30	28,806,017.49	$1,735,230.19
10/31/2015	27,139,632.35	30,030,998.12	$2,891,365.77
11/30/2015			
12/31/2015			
01/31/2016			
02/29/2016			
03/31/2016			
04/30/2016			
05/31/2016			
06/30/2016			
07/31/2016			
08/31/2016			
09/30/2016			

Change in Market Value of Plan Assets (as of October 31, 2015):

Increase from 10/01/15 $1,224,980.63 - annual

* Includes all accrued interest and dividends.

Cash Accounts - Per Salem Trust

Balance as of October 1, 2015			**$919,871.11**
Receipts:			
City Contribution		$62,447.61	
Mandatory EE Contributions		36,878.47	
Voluntary EE Contributions		3,050.18	
Sale-Securities (Cost Value)		909,435.61	
Gain (Loss) Sale of Securities		94,805.64	
Dividends		14,704.52	
Interest & Mutual Fund Reinv.		17,444.96	
Other - Litigation Proceedings		0.00	
Total Receipts			$1,138,766.99
Disbursements:			
Securities Purchased - Equity (incl. Unit Trusts)		($611,487.57)	
Securities Purchased - US Govt. Oblig.		(5,155.08)	
Securities Purchased - Mortgage Backed Sec.		0.00	
Securities Purchased - Principal Real Estate Acct.		0.00	
Securities Purchased - Municipal		0.00	
Securities Purchased - Corp. & Foreign Bond		(264,899.59)	
Payments to Retirees *- See page 3 for a listing of all monthly payments.*		($149,468.60)	
Payments to other Participants		($3,135.41)	
Forbes, Randy - DB Mand.	$577.26		
Leisler, Michael - DB Mand.	2,558.15		
	0.00		
	0.00		
	0.00		
	0.00		
Expenses		($13,425.61)	
Admin/Actuarial Fees	$4,260.00		
Investment/Monitor Fees	0.00		
Custodian Fees/ Commissions	5,886.61		
Legal Fees	2,829.00		
Misc - Trustee school	450.00		
Total Disbursements			(1,047,571.86)
Balance as of October 31, 2015			**$1,011,066.24**

See pg. 5 for breakdown of cash holdings by account.

Monthly Benefit Payments to Retired, Deceased and Disabled Participants - October, 2015

Barnhart, Betty	$3,758.64
Blackey, William	492.27
Bliven, Thomas	1,184.26
Bowey, Janet	169.24
Breaks, Robert	708.87
Cady, Anna	2,808.30
Chamberlain, Kathleen	803.75
Conforti, James	611.91
Cooper, Michael	1,453.46
Day, Robert	2,633.89
Dearborn, Dennis	1,409.73
Ellis, Alberta	893.52
Findley, Cindy	423.80
Foster, James	4,032.48
Franklin, James	3,805.31
Fuhrman, Frank	3,320.02
Griffith, Fred	4,543.01
Grimm, Sandra	1,428.58
Groom, Rebecca	2,457.09
Groom, William	2,253.96
Gurnee, Stella	1,321.01
Hacker, Lea Ann	395.50
Hammons, Elizabeth	1,596.60
Hopkins-Peace, Krystal	1,586.62
Huntt, Steven	2,793.36
Kelly, Margaret	832.60
Kelly, Shirley	3,469.66
Kincaid, Kathyrn	1,377.13
Klimek, Frank	1,802.47
Koch, Michael	3,530.36
Kosuta, Christopher	1,851.28
Leftwich, Glenda	1,033.35
Levine, Steven	2,579.16
MacDuffie, Ray	625.21
May, Roger (ben Randall M.)	775.98
McCurry, Dennis	2,517.57
McNulty, John	980.89
Milholen, Ellen	3,050.53
Miller, Lee	505.28
Monning, Linda (benef.)	1,445.22
Norris, Annie (benef.)	$2,155.45
Oddie, William	2,726.69
Palmer, Roberta	3,673.00
Parker, Kenneth	5,508.77
Parsons, Janice	3,909.02
Peace, Michael	3,140.90
Pike, Warren & DeAnn	3,721.69
Potts, Wilford J.	1,040.28
Redfield, Rosemary	593.38
Roberts, Veronica	1,015.38
Rorem, Steve	1,648.52
Schulz, William (benef.)	739.04
Sheffield, Henrica	2,288.10
Shelley, John	4,595.68
Sheridan, Linda	2,173.28
Sheward, Thomas	2,202.38
Shroyer, Terry	1,203.68
Simmons, Thomas	2,507.28
Skeens, Sandra (benef.)	1,763.20
Smith, Glenn	1,906.95
Sneddon, Margaret	1,904.74
Steinebach, Donna	4,907.78
Stuhr, Donald	1,249.53
Sutton, Robert	596.47
Taylor, Gerald	1,187.68
Termini, Jimmy (MPP)	867.00
Treon, Shirley	2,416.28
Turner, Larry	1,463.71
Van Arsdale, Wayne	491.09
Walker, Glenn	3,477.10
Walker, Russell	518.96
Walsh, Thomas (MPP)**	0.00
Whitmarsh, Dorothy	1,415.50
Wilson, Judith K.	2,506.31
Wilson, Stephen	157.09
Wolf, Steven	2,679.15
Zdzinicki, Robert	399.90
Zurawski, Marceda	1,455.77

Total Payments for Monthly Benefits: $149,468.60

** Payment held awaiting confirmation.

Total in Pay Status: 77 *- excludes Walsh ($0.00)*
(includes 1 MPP participant)

** New retiree this month. (none in October, 2015)*

Cash Account Reconciliation - continued

Securities Sold - October 2015

	Gain and Loss Summary	Cost Value	Proceeds	Gain(Loss)
HCC	CIGNA - 500 sh.	$15,067.95	$67,293.81	$52,225.86
	Constellation Brnd. - 300 sh.	26,991.03	40,417.83	13,426.80
	Ecolab, Inc - 600 sh.	69,437.04	71,460.42	2,023.38
	Pfizer, Inc. - 1,800 sh.	50,215.86	62,640.82	12,424.96
		0.00	0.00	0.00
BOST	Biogen, Inc. 118 sh.	37,853.88	32,716.39	(5,137.49)
	CVS 230 sh.	13,546.64	23,520.47	9,973.83
	Dollar Tree,Inc. 1,318 sh	108,417.58	82,086.99	(26,330.59)
	Linkedin Corp. 372sh	80,216.84	72,335.77	(7,881.07)
	Marsh & McClennan 1,387sh	75,368.61	76,859.54	1,490.93
	Martin Marietta 646 sh.	81,569.85	100,481.94	18,912.09
	Regeneration Pharm. 30 sh.	11,788.71	15,506.39	3,717.68
	Tesla Motors 122sh.	25,721.84	28,347.09	2,625.25
	Under Armour 585 sh.	38,301.82	53,905.19	15,603.37
	Vertex Pharm. 166 sh.	18,653.54	17,641.42	(1,012.12)
	Allergan, PLC 123 sh.	29,795.61	32,723.30	2,927.69
		0.00	0.00	0.00
Integrity	US Treas. 2.25%, 11/24 75k	74,399.41	75,823.24	1,423.83
	FNMA 3.5%, 8/26, 1.64604k	1,733.49	1,646.04	(87.45)
	FNMA 3.0%, 10/21, 1.05478k	1,099.28	1,054.78	(44.50)
	FNMA 4.5%, 8/30, 1.59568k	1,737.30	1,595.68	(141.62)
	FNMA 3.0%, 9/22, 8.19428k	8,685.94	8,194.28	(491.66)
	FNMA 3.5%, 8/25, 3.84269k	4,065.45	3,842.69	(222.76)
	GNMA 3.0%, 11/26, 1.94387k	2,026.18	1,943.87	(82.31)
	GNMA 4.5%, 10/24, 1.5715k	1,703.11	1,571.50	(131.61)
	CelegeneCo.2.45%, 10/15, 75k	75,300.00	75,000.00	(300.00)
	Gilead Sci. 2.55%, 11/15, 30k	29,972.40	30,307.80	335.40
	Waste Manag. 2.6%,9/16, 25k	25,766.25	25,324.00	(442.25)
		0.00	0.00	0.00
		0.00	0.00	0.00
Mut FD.		0.00	0.00	0.00
		0.00	0.00	0.00
	Total Sales for Month	$909,435.61	$1,004,241.25	$94,805.64

MM sold for cash:	$320,836.70
Less CSM	0.00
Total Assets Disposed of: (per Salem)	$1,325,077.95

Securities Purchased

See attached pages from the various Salem Trust Reports.

Cash Account Reconciliation - continued

Cash Account Recap	beg. of month October 1, 2015	end of month Oct. 31, 2015
Cash - Receipt/Disbursement Acct.	$350,821.64	$336,403.54
Cash - HCC Equity Acct.	313,970.45	344,314.22
- Cash due from/(to) Broker (HCC)	80,780.41	50,126.02
Cash - Boston Company Acct.	321,390.02	257,755.74
- Cash due from/(to) Broker (Bos.)	81,889.27	(21,467.89)
Cash - Mutual Fund Acct.	20.29	20.29
Cash - CS McKee Acct.	0.00	0.00
Cash - Integrity Fixed Acct.	308,151.57	63,676.84
- Cash due from/(to) Broker (Integ).	(108,027.35)	(19,762.52)
Total Cash	$1,348,996.30	$1,011,066.24

Asset Recap as of October 31, 2015

		Cost Value	*Market Value*
CASH	All accounts combined	$1,011,066.24	$1,011,066.24
BONDS	US Government Obligations	$835,257.63	$855,770.70
	Mortgage Backed Securities	1,052,830.59	1,045,633.97
	Collateralized Mtg. Obligations	66,713.13	68,457.57
	Municipal Obligations	427,973.80	429,179.30
	Corp. & Foreign Bonds	3,325,209.59	3,237,846.06
	Total Fixed Income (Integrity)	$5,707,984.74	$5,636,887.60
EQUITIES		$12,939,240.10	$14,562,561.01
INT'L EQUITY MUTUAL FUNDS		$2,207,999.48	$2,608,135.67
REAL ESTATE TRUST ACCOUNT (Prin.)		$3,200,000.00	$3,713,794.31
C.S. McKEE FIXED INCOME MUT. FUND		$0.00	$0.00
FLORIDA MUNI. INVEST. TRUST		$2,000,000.00	$2,425,211.50
TOTALS BEFORE ACCRUALS		$27,066,290.56	$29,957,656.33
	Accrued Dividends	13,264.21	13,264.21
	Accrued Interest	60,077.58	60,077.58
	Other Accrual - Mut. Fund Acct.	0.00	0.00
TOTAL Acct. VALUE as of Oct. 31, 2015		**$27,139,632.35**	**$30,030,998.12**
	Receipt/Disb Acct.	*$336,403.54*	*$336,403.54*
	HCC Account	*6,540,456.02*	*7,254,145.81*
	Boston Company	*7,042,776.38*	*7,952,407.50*
	Mutual Fund Account - Int.	*2,208,019.77*	*2,608,155.96*
	Principal Real Estate Acct.	*3,200,000.00*	*3,713,794.31*
	CSM Account	*0.00*	*0.00*
	Florida Municipal Invst. Trust	*2,000,000.00*	*2,425,211.50*
	Integrity Financial Acct.	*5,811,976.64*	*5,740,879.50*
	Total Account Check	*$27,139,632.35*	*$30,030,998.12*

Cost and Market Value Reconciliation as of October 31, 2015

	Cost Value	*Market Value*
Values as of October 1, 2015	$27,070,787.30	$28,806,017.49
Contributions	102,376.26	102,376.26
Income Receipts	126,955.12	126,955.12
Change in Accruals	5,543.27	5,543.27
Benefit Payments	(152,604.01)	(152,604.01)
Admin. and Invest. Expenses	(13,425.61)	(13,425.61)
Unrealized Gain / (Loss)	0.00	1,156,135.58
Adjust to Balance	0.02	0.02
Values as of Sept. 30, 2015	**$27,139,632.35**	**$30,030,998.12**
Yield for the month (net of admin and invest. expenses)	0.44%	4.43%

City of Port Orange
General Employees Defined Benefit Retirement Plan

Monthly, Quarterly and Year-to-date Review of Investment Performance - 9/30/2016

	Fiscal Year	1st Quarter	Current Month
Start	10/01/2015	10/01/2015	
End	09/30/2016	12/31/2015	October, 2015
Market Value - Start	$28,806,017.49	28,806,017.49	28,806,017.49
Contributions			
- City	62,447.61	62,447.61	62,447.61
- Mandatory 7.5%	36,878.47	36,878.47	36,878.47
- Voluntary EE	3,050.18	3,050.18	3,050.18
Other Income	0.00	0.00	0.00
Interest	17,444.96	17,444.96	17,444.96
Dividends	14,704.52	14,704.52	14,704.52
Realized Gains/(Losses)	94,805.66	94,805.66	94,805.66
Increase/(Decrease) in Unrealized Appreciation	1,156,135.58	1,156,135.58	1,156,135.58
Prior Accrued Interest	(67,798.52)	(67,798.52)	(67,798.52)
Current Accrued Interest	73,341.79	73,341.79	73,341.79
Payments to Participants	(152,604.01)	(152,604.01)	(152,604.01)
Administrative Expenses	(7,539.00)	(7,539.00)	(7,539.00)
Investment Expenses	(5,886.61)	(5,886.61)	(5,886.61)
Market Value - End	$30,030,998.12	$30,030,998.12	$30,030,998.12
Yield per 2i/(a+b-i)	4.4307%	4.4307%	4.4307%
i	*1,275,208.38*	*1,275,208.38*	*1,275,208.38*
2i	*2,550,416.76*	*2,550,416.76*	*2,550,416.76*
a+b-i	*57,561,807.23*	*57,561,807.23*	*57,561,807.23*
Contributions for period:	102,376.26	102,376.26	102,376.26
Bens/Exp. for period:	(166,029.62)	(166,029.62)	(166,029.62)
Net Cash Flow before income: (Vol. cons/ benefits included)	(63,653.36)	(63,653.36)	(63,653.36)

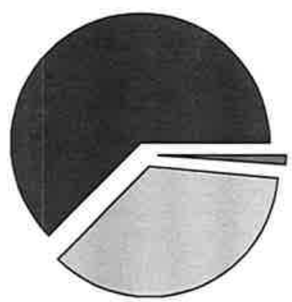
ACCOUNT STATEMENT-508

SALEM TRUST COMPANY

Statement Period	10/01/2015 through 10/31/2015
Account Number	3040069421
	SALEM TRUST COMPANY
	AS CUSTODIAN FOR THE
	CITY OF PORT ORANGE GENERAL
	EMPLOYEES RETIREMENT SYSTEM
	INTEGRITY FIXED INCOME

Schedule Of Purchases

Purchase Allocation



62.6%	**CORPORATE BONDS**	264,899.59
36.2%	**SHORT TERM INVESTMENTS**	153,394.40
1.2%	**U S GOVERNMENT OBLIGATIONS**	5,155.08
100.0%	Total	423,449.07

Purchase Schedule

TRADE DATE	SETTLMT DATE	DESCRIPTION	UNITS	COST
SHORT TERM INVESTMENTS				
		CUSIP # 38141W315 GOLDMAN SACHS TREASURY OBLIGATIONS FUND-ADM		
		TOTAL ACTIVITY FROM 10/01/2015 TO 10/31/2015		
		PURCHASED 153,394.4 GOLDMAN SACHS TREASURY OBLIGATIONS FUND-ADM ON 10/31/2015 AT 1.00	153,394.4	153,394.40
TOTAL			153,394.4	153,394.40
TOTAL SHORT TERM INVESTMENTS			153,394.4	153,394.40

Statement Period 10/01/2015 through 10/31/2015
Account Number 3040069421

SALEM TRUST COMPANY
AS CUSTODIAN FOR THE
CITY OF PORT ORANGE GENERAL
EMPLOYEES RETIREMENT SYSTEM
INTEGRITY FIXED INCOME

Schedule Of Purchases

TRADE DATE	SETTLMT DATE	DESCRIPTION	UNITS	COST
U S GOVERNMENT OBLIGATIONS				
		CUSIP # 912810RH3 US TREASURY N/B 3.125% 08/15/2044		
10/08/2015	10/15/2015	PURCHASED 5,000 UNITS US TREASURY N/B 3.125% 08/15/2044 ON 10/08/2015 AT 103.1016 THRU JEFFRIES AND COMPANY INC.	5,000	5,155.08
		TOTAL	5,000	5,155.08
TOTAL U S GOVERNMENT OBLIGATIONS			5,000	5,155.08
CORPORATE BONDS				
		CUSIP # 256677AD7 DOLLAR GENERAL CORP DG 4.15% 11/01/2025		
10/29/2015	11/03/2015	PURCHASED 55,000 UNITS DOLLAR GENERAL CORP DG 4.15% 11/01/2025 ON 10/29/2015 AT 99.811 THRU STIFEL NICOLAUS AND COMPANY	55,000	54,896.05
		TOTAL	55,000	54,896.05
		CUSIP # 69349LAA6 PNC BANK MEDIUM TERM NOTE NON CALLABLE DTD 12/10/2004 5.25% 01/15/2017		
10/01/2015	10/06/2015	PURCHASED 80,000 UNITS PNC BANK MEDIUM TERM NOTE NON CALLABLE DTD 12/10/2004 5.25% 01/15/2017 ON 10/01/2015 AT 104.9766 THRU 67526	80,000	83,981.29
		TOTAL	80,000	83,981.29

Statement Period 10/01/2015 through 10/31/2015
Account Number 3040069421
SALEM TRUST COMPANY
AS CUSTODIAN FOR THE
CITY OF PORT ORANGE GENERAL
EMPLOYEES RETIREMENT SYSTEM
INTEGRITY FIXED INCOME

Schedule Of Purchases

TRADE DATE	SETTLMT DATE	DESCRIPTION	UNITS	COST
		CUSIP # 74834LAW0 QUEST DGX 2.5% 03/30/2020		
10/15/2015	10/21/2015	PURCHASED 55,000 UNITS QUEST DGX 2.5% 03/30/2020 ON 10/15/2015 AT 100.045 THRU JEFFRIES AND COMPANY INC.	55,000	55,024.75
	TOTAL		55,000	55,024.75
		CUSIP # 931142BF9 WALMART STORES INC WAL MART STORES INC NON CALLABLE DTD 02/15/2000 7.55% 02/15/2030		
10/29/2015	11/03/2015	PURCHASED 50,000 UNITS WALMART STORES INC WAL MART STORES INC NON CALLABLE DTD 02/15/2000 7.55% 02/15/2030 ON 10/29/2015 AT 141.995 THRU FIRST TENNESSEE SE	50,000	70,997.50
	TOTAL		50,000	70,997.50
TOTAL CORPORATE BONDS			240,000	264,899.59
TOTAL PURCHASES				423,449.07

SALEM TRUST COMPANY

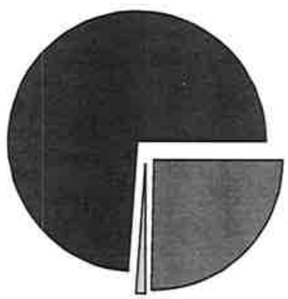
ACCOUNT STATEMENT-508

Statement Period 10/01/2015 through 10/31/2015
Account Number 3040001020

SALEM TRUST COMPANY
AS CUSTODIAN FOR THE
CITY OF PORT ORANGE GENERAL
EMPLOYEES RETIREMENT SYSTEM
BOSTON COMPANY

Schedule Of Purchases

Purchase Allocation



73.8%	COMMON STOCK	536,780.16
1.0%	FOREIGN STOCK	7,155.42
25.2%	SHORT TERM INVESTMENTS	183,743.77
100.0%	Total	727,679.35

Purchase Schedule

TRADE DATE	SETTLMT DATE	DESCRIPTION	UNITS	COST
SHORT TERM INVESTMENTS				
		CUSIP # 38141W315 GOLDMAN SACHS TREASURY OBLIGATIONS FUND-ADM		
		TOTAL ACTIVITY FROM 10/01/2015 TO 10/31/2015		
		PURCHASED 183,743.77 GOLDMAN SACHS TREASURY OBLIGATIONS FUND-ADM ON 10/31/2015 AT 1.00	183,743.77	183,743.77
TOTAL			183,743.77	183,743.77
TOTAL SHORT TERM INVESTMENTS			183,743.77	183,743.77

Statement Period 10/01/2015 through 10/31/2015
Account Number 3040001020

SALEM TRUST COMPANY
AS CUSTODIAN FOR THE
CITY OF PORT ORANGE GENERAL
EMPLOYEES RETIREMENT SYSTEM
BOSTON COMPANY

Schedule Of Purchases

TRADE DATE	SETTLMT DATE	DESCRIPTION	UNITS	COST
COMMON STOCK				
		CUSIP # 00287Y109 ABBVIE INC		
10/08/2015	10/14/2015	PURCHASED 3 SHS ABBVIE INC ON 10/08/2015 AT 55.5825 THRU MORGAN STANLEY DEAN WITTER COMMISSIONS PAID 0.03	3	166.78
10/08/2015	10/14/2015	PURCHASED 137 SHS ABBVIE INC ON 10/08/2015 AT 55.9466 THRU COWEN AND COMPANY COMMISSIONS PAID 5.48	137	7,670.16
	TOTAL		140	7,836.94
		CUSIP # 039483102 ARCHER-DANIELS-MIDLAND ARCHER DANIELS MIDLAND CO		
10/08/2015	10/14/2015	PURCHASED 182 SHS ARCHER-DANIELS-MIDLAND ARCHER DANIELS MIDLAND CO ON 10/08/2015 AT 44.82 THRU BT ALEX BROWN INC COMMISSIONS PAID 2.73	182	8,159.97
	TOTAL		182	8,159.97
		CUSIP # 09247X101 BLACKROCK INC CLASS A		
10/22/2015	10/27/2015	PURCHASED 36 SHS BLACKROCK INC CLASS A ON 10/22/2015 AT 333.945 THRU KEEFE BRUYETTE WOODS COMMISSIONS PAID 1.44	36	12,023.46
	TOTAL		36	12,023.46

SALEM TRUST COMPANY

ACCOUNT STATEMENT-508

Statement Period 10/01/2015 through 10/31/2015
Account Number 3040001020

SALEM TRUST COMPANY
AS CUSTODIAN FOR THE
CITY OF PORT ORANGE GENERAL
EMPLOYEES RETIREMENT SYSTEM
BOSTON COMPANY

Schedule Of Purchases

TRADE DATE	SETTLMT DATE	DESCRIPTION	UNITS	COST
		CUSIP # 110122108 BRISTOL-MYERS SQUIBB CO COM		
10/08/2015	10/14/2015	PURCHASED 99 SHS BRISTOL-MYERS SQUIBB CO COM ON 10/08/2015 AT 60.535 THRU LIQUIDNET INC COMMISSIONS PAID 1.49	99	5,994.46
10/08/2015	10/14/2015	PURCHASED 37 SHS BRISTOL-MYERS SQUIBB CO COM ON 10/08/2015 AT 60.6725 THRU MORGAN STANLEY DEAN WITTER COMMISSIONS PAID 0.31	37	2,245.19
		TOTAL	136	8,239.65
		CUSIP # 125269100 CF INDUSTRIES HOLDINGS INC		
10/02/2015	10/07/2015	PURCHASED 120 SHS CF INDUSTRIES HOLDINGS INC ON 10/02/2015 AT 46.3013 THRU BEAR STEARNS AND CO COMMISSIONS PAID 4.80	120	5,560.96
10/05/2015	10/08/2015	PURCHASED 63 SHS CF INDUSTRIES HOLDINGS INC ON 10/05/2015 AT 48.9184 THRU BEAR STEARNS AND CO COMMISSIONS PAID 2.52	63	3,084.38
10/05/2015	10/08/2015	PURCHASED 63 SHS CF INDUSTRIES HOLDINGS INC ON 10/05/2015 AT 48.6457 THRU BEAR STEARNS AND CO COMMISSIONS PAID 2.52	63	3,067.20
10/06/2015	10/09/2015	PURCHASED 4 SHS CF INDUSTRIES HOLDINGS INC ON 10/06/2015 AT 49.725 THRU LIQUIDNET INC COMMISSIONS PAID 0.06	4	198.96
10/06/2015	10/09/2015	PURCHASED 40 SHS CF INDUSTRIES HOLDINGS INC ON 10/06/2015 AT 49.645 THRU LIQUIDNET INC COMMISSIONS PAID 0.60	40	1,986.40

Statement Period 10/01/2015 through 10/31/2015
Account Number 3040001020

SALEM TRUST COMPANY
AS CUSTODIAN FOR THE
CITY OF PORT ORANGE GENERAL
EMPLOYEES RETIREMENT SYSTEM
BOSTON COMPANY

Schedule Of Purchases

TRADE DATE	SETTLMT DATE	DESCRIPTION	UNITS	COST
10/06/2015	10/09/2015	PURCHASED 53 SHS CF INDUSTRIES HOLDINGS INC ON 10/06/2015 AT 49.3987 THRU FIDELITY CAPITAL M COMMISSIONS PAID 0.45	53	2,618.58
10/06/2015	10/09/2015	PURCHASED 59 SHS CF INDUSTRIES HOLDINGS INC ON 10/06/2015 AT 49.3776 THRU FIDELITY CAPITAL M COMMISSIONS PAID 0.50	59	2,913.78
10/06/2015	10/09/2015	PURCHASED 12 SHS CF INDUSTRIES HOLDINGS INC ON 10/06/2015 AT 49.3482 THRU MORGAN STANLEY DEAN WITTER COMMISSIONS PAID 0.10	12	592.28
10/06/2015	10/09/2015	PURCHASED 5 SHS CF INDUSTRIES HOLDINGS INC ON 10/06/2015 AT 49.6068 THRU MORGAN STANLEY DEAN WITTER COMMISSIONS PAID 0.04	5	248.07
10/06/2015	10/09/2015	PURCHASED 2 SHS CF INDUSTRIES HOLDINGS INC ON 10/06/2015 AT 49.409 THRU MERRILL LYNCH, PIERCE, FENNER COMMISSIONS PAID 0.02	2	98.84
10/06/2015	10/09/2015	PURCHASED 1 SH CF INDUSTRIES HOLDINGS INC ON 10/06/2015 AT 49.4583 THRU GOLDMAN, SACHS AND CO COMMISSIONS PAID 0.01	1	49.47
10/06/2015	10/09/2015	PURCHASED 3 SHS CF INDUSTRIES HOLDINGS INC ON 10/06/2015 AT 49.3751 THRU SMITH BARNEY INC COMMISSIONS PAID 0.03	3	148.16
10/06/2015	10/09/2015	PURCHASED 1 SH CF INDUSTRIES HOLDINGS INC ON 10/06/2015 AT 49.4687 THRU BT ALEX BROWN INC COMMISSIONS PAID 0.01	1	49.48
10/06/2015	10/09/2015	PURCHASED 7 SHS CF INDUSTRIES HOLDINGS INC ON 10/06/2015 AT 49.3316 THRU BT ALEX BROWN INC COMMISSIONS PAID 0.06	7	345.38

ST
SALEM TRUST
COMPANY

ACCOUNT STATEMENT-508

Statement Period 10/01/2015 through 10/31/2015
Account Number 3040001020

SALEM TRUST COMPANY
AS CUSTODIAN FOR THE
CITY OF PORT ORANGE GENERAL
EMPLOYEES RETIREMENT SYSTEM
BOSTON COMPANY

Schedule Of Purchases

TRADE DATE	SETTLMT DATE	DESCRIPTION	UNITS	COST
10/06/2015	10/09/2015	PURCHASED 11 SHS CF INDUSTRIES HOLDINGS INC ON 10/06/2015 AT 49.4939 THRU FIRST BOSTON, NY COMMISSIONS PAID 0.09	11	544.52
10/06/2015	10/09/2015	PURCHASED 8 SHS CF INDUSTRIES HOLDINGS INC ON 10/06/2015 AT 49.5879 THRU BEAR STEARNS AND CO COMMISSIONS PAID 0.07	8	396.77
10/06/2015	10/09/2015	PURCHASED 4 SHS CF INDUSTRIES HOLDINGS INC ON 10/06/2015 AT 49.386 THRU FIRST BOSTON, NY COMMISSIONS PAID 0.03	4	197.57
10/06/2015	10/09/2015	PURCHASED 8 SHS CF INDUSTRIES HOLDINGS INC ON 10/06/2015 AT 49.6225 THRU 69237 COMMISSIONS PAID 0.02	8	397.00
10/07/2015	10/13/2015	PURCHASED 201 SHS CF INDUSTRIES HOLDINGS INC ON 10/07/2015 AT 51.4015 THRU BEAR STEARNS AND CO COMMISSIONS PAID 8.04	201	10,339.74
10/07/2015	10/13/2015	PURCHASED 94 SHS CF INDUSTRIES HOLDINGS INC ON 10/07/2015 AT 51.976 THRU BEAR STEARNS AND CO COMMISSIONS PAID 3.76	94	4,889.50
10/08/2015	10/14/2015	PURCHASED 54 SHS CF INDUSTRIES HOLDINGS INC ON 10/08/2015 AT 53.0108 THRU LIQUIDNET INC COMMISSIONS PAID 0.81	54	2,863.39
10/08/2015	10/14/2015	PURCHASED 5 SHS CF INDUSTRIES HOLDINGS INC ON 10/08/2015 AT 51.94 THRU 69237 COMMISSIONS PAID 0.01	5	259.71
10/08/2015	10/14/2015	PURCHASED 8 SHS CF INDUSTRIES HOLDINGS INC ON 10/08/2015 AT 52.9231 THRU GOLDMAN, SACHS AND CO COMMISSIONS PAID 0.07	8	423.45

SALEM TRUST COMPANY

ACCOUNT STATEMENT-508

Statement Period: 10/01/2015 through 10/31/2015
Account Number: 3040001020

**SALEM TRUST COMPANY
AS CUSTODIAN FOR THE
CITY OF PORT ORANGE GENERAL
EMPLOYEES RETIREMENT SYSTEM
BOSTON COMPANY**

Schedule Of Purchases

TRADE DATE	SETTLMT DATE	DESCRIPTION	UNITS	COST
10/08/2015	10/14/2015	PURCHASED 8 SHS CF INDUSTRIES HOLDINGS INC ON 10/08/2015 AT 52.8736 THRU BT ALEX BROWN INC COMMISSIONS PAID 0.07	8	423.06
10/08/2015	10/14/2015	PURCHASED 7 SHS CF INDUSTRIES HOLDINGS INC ON 10/08/2015 AT 52.7072 THRU MORGAN STANLEY DEAN WITTER COMMISSIONS PAID 0.06	7	369.01
10/08/2015	10/14/2015	PURCHASED 5 SHS CF INDUSTRIES HOLDINGS INC ON 10/08/2015 AT 51.91 THRU SMITH BARNEY INC COMMISSIONS PAID 0.04	5	259.59
10/08/2015	10/14/2015	PURCHASED 105 SHS CF INDUSTRIES HOLDINGS INC ON 10/08/2015 AT 52.4705 THRU FIDELITY CAPITAL M COMMISSIONS PAID 0.89	105	5,510.29
10/08/2015	10/14/2015	PURCHASED 15 SHS CF INDUSTRIES HOLDINGS INC ON 10/08/2015 AT 52.8063 THRU MERRILL LYNCH, PIERCE, FENNER COMMISSIONS PAID 0.13	15	792.22
10/08/2015	10/14/2015	PURCHASED 26 SHS CF INDUSTRIES HOLDINGS INC ON 10/08/2015 AT 53.015 THRU STATE STREET BROKE COMMISSIONS PAID 0.26	26	1,378.65
10/08/2015	10/14/2015	PURCHASED 9 SHS CF INDUSTRIES HOLDINGS INC ON 10/08/2015 AT 52.944 THRU BEAR STEARNS AND CO COMMISSIONS PAID 0.08	9	476.58
10/08/2015	10/14/2015	PURCHASED 17 SHS CF INDUSTRIES HOLDINGS INC ON 10/08/2015 AT 52.9392 THRU FIRST BOSTON, NY COMMISSIONS PAID 0.14	17	900.11
10/15/2015	10/20/2015	PURCHASED 1 SH CF INDUSTRIES HOLDINGS INC ON 10/15/2015 AT 52.7171 THRU SANFORD BERNSTEIN AND COMPANY COMMISSIONS PAID 0.01	1	52.73

Statement Period	10/01/2015 through 10/31/2015
Account Number	3040001020
	SALEM TRUST COMPANY AS CUSTODIAN FOR THE CITY OF PORT ORANGE GENERAL EMPLOYEES RETIREMENT SYSTEM BOSTON COMPANY

Schedule Of Purchases

TRADE DATE	SETTLMT DATE	DESCRIPTION	UNITS	COST
10/15/2015	10/20/2015	PURCHASED 199 SHS CF INDUSTRIES HOLDINGS INC ON 10/15/2015 AT 53.3872 THRU BEAR STEARNS AND CO COMMISSIONS PAID 7.96	199	10,632.01
10/22/2015	10/27/2015	PURCHASED 241 SHS CF INDUSTRIES HOLDINGS INC ON 10/22/2015 AT 53.1176 THRU LIQUIDNET INC COMMISSIONS PAID 3.62	241	12,804.96
10/22/2015	10/27/2015	PURCHASED 81 SHS CF INDUSTRIES HOLDINGS INC ON 10/22/2015 AT 53.7917 THRU DAIN RAUSCHER INCORPORATED COMMISSIONS PAID 3.24	81	4,360.37
10/22/2015	10/27/2015	PURCHASED 33 SHS CF INDUSTRIES HOLDINGS INC ON 10/22/2015 AT 52.9679 THRU SANFORD BERNSTEIN AND COMPANY COMMISSIONS PAID 0.28	33	1,748.22
TOTAL			1,573	80,981.39
CUSIP # 156782104 CERNER CORP				
10/13/2015	10/16/2015	PURCHASED 117 SHS CERNER CORP ON 10/13/2015 AT 65.2931 THRU BARCLAYS CAPITAL L COMMISSIONS PAID 4.68	117	7,643.97
TOTAL			117	7,643.97
CUSIP # 17275R102 CISCO SYSTEMS INC				
10/09/2015	10/15/2015	PURCHASED 1,111 SHS CISCO SYSTEMS INC ON 10/09/2015 AT 27.9214 THRU SANFORD BERNSTEIN AND COMPANY COMMISSIONS PAID 9.44	1,111	31,030.12
TOTAL			1,111	31,030.12

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SALEM TRUST COMPANY
AS CUSTODIAN FOR THE
CITY OF PORT ORANGE GENERAL
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Schedule Of Purchases

TRADE DATE	SETTLMT DATE	DESCRIPTION	UNITS	COST
	CUSIP # 177376100 CITRIX SYSTEMS INC			
10/09/2015	10/15/2015	PURCHASED 240 SHS CITRIX SYSTEMS INC ON 10/09/2015 AT 75.1824 THRU MORGAN STANLEY DEAN WITTER COMMISSIONS PAID 9.60	240	18,053.38
	TOTAL		240	18,053.38
	CUSIP # 20030N101 COMCAST CORP CORP-CL A			
10/07/2015	10/13/2015	PURCHASED 165 SHS COMCAST CORP CORP-CL A ON 10/07/2015 AT 59.5002 THRU MORGAN STANLEY DEAN WITTER COMMISSIONS PAID 1.40	165	9,818.93
	TOTAL		165	9,818.93
	CUSIP # 205887102 CONAGRA FOODS INC			
10/08/2015	10/14/2015	PURCHASED 251 SHS CONAGRA FOODS INC ON 10/08/2015 AT 41.6049 THRU RAYMOND JAMES AND ASSOCIATES INC COMMISSIONS PAID 10.04	251	10,452.87
	TOTAL		251	10,452.87
	CUSIP # 235851102 DANAHER CORP			
10/05/2015	10/08/2015	PURCHASED 94 SHS DANAHER CORP ON 10/05/2015 AT 87.5178 THRU BEAR STEARNS AND CO COMMISSIONS PAID 3.76	94	8,230.43
	TOTAL		94	8,230.43

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Schedule Of Purchases

TRADE DATE	SETTLMT DATE	DESCRIPTION	UNITS	COST
		CUSIP # 30219G108 EXPRESS SCRIPTS		
10/16/2015	10/21/2015	PURCHASED 102 SHS EXPRESS SCRIPTS ON 10/16/2015 AT 86.9707 THRU MORGAN STANLEY DEAN WITTER COMMISSIONS PAID 0.87	102	8,871.88
10/16/2015	10/21/2015	PURCHASED 286 SHS EXPRESS SCRIPTS ON 10/16/2015 AT 85.921 THRU MORGAN STANLEY DEAN WITTER COMMISSIONS PAID 2.43	286	24,575.84
10/16/2015	10/21/2015	PURCHASED 215 SHS EXPRESS SCRIPTS ON 10/16/2015 AT 86.383 THRU SANFORD BERNSTEIN AND COMPANY COMMISSIONS PAID 1.83	215	18,574.18
10/16/2015	10/21/2015	PURCHASED 228 SHS EXPRESS SCRIPTS ON 10/16/2015 AT 85.9862 THRU SANFORD BERNSTEIN AND COMPANY COMMISSIONS PAID 1.94	228	19,606.79
10/16/2015	10/21/2015	PURCHASED 12 SHS EXPRESS SCRIPTS ON 10/16/2015 AT 86.965 THRU LIQUIDNET INC COMMISSIONS PAID 0.18	12	1,043.76
10/19/2015	10/22/2015	PURCHASED 237 SHS EXPRESS SCRIPTS ON 10/19/2015 AT 86.8489 THRU MORGAN STANLEY DEAN WITTER COMMISSIONS PAID 2.01	237	20,585.20
10/19/2015	10/22/2015	PURCHASED 76 SHS EXPRESS SCRIPTS ON 10/19/2015 AT 86.8637 THRU SANFORD BERNSTEIN AND COMPANY COMMISSIONS PAID 0.65	76	6,602.29
10/19/2015	10/22/2015	PURCHASED 175 SHS EXPRESS SCRIPTS ON 10/19/2015 AT 87.2729 THRU BEAR STEARNS AND CO COMMISSIONS PAID 7.00	175	15,279.76

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Account Number	3040001020
	SALEM TRUST COMPANY AS CUSTODIAN FOR THE CITY OF PORT ORANGE GENERAL EMPLOYEES RETIREMENT SYSTEM BOSTON COMPANY

Schedule Of Purchases

TRADE DATE	SETTLMT DATE	DESCRIPTION	UNITS	COST
10/19/2015	10/22/2015	PURCHASED 8 SHS EXPRESS SCRIPTS ON 10/19/2015 AT 86.98 THRU LIQUIDNET INC COMMISSIONS PAID 0.12	8	695.96
TOTAL			1,339	115,835.66
CUSIP # 31428X106 FEDEX CORP CORPORATION				
10/08/2015	10/14/2015	PURCHASED 109 SHS FEDEX CORP CORPORATION ON 10/08/2015 AT 155.6121 THRU CANTOR FITZGERALD COMPANY COMMISSIONS PAID 1.64	109	16,963.36
TOTAL			109	16,963.36
CUSIP # 437076102 HOME DEPOT INC				
10/07/2015	10/13/2015	PURCHASED 146 SHS HOME DEPOT INC ON 10/07/2015 AT 119.2501 THRU FRIEDMAN BILLINGS COMMISSIONS PAID 5.84	146	17,416.35
10/23/2015	10/28/2015	PURCHASED 298 SHS HOME DEPOT INC ON 10/23/2015 AT 124.3209 THRU FRIEDMAN BILLINGS COMMISSIONS PAID 11.92	298	37,059.55
TOTAL			444	54,475.90
CUSIP # 438516106 HONEYWELL INTERNATIONAL INC				
10/05/2015	10/08/2015	PURCHASED 51 SHS HONEYWELL INTERNATIONAL INC ON 10/05/2015 AT 98.3023 THRU SANFORD BERNSTEIN AND COMPANY COMMISSIONS PAID 0.43	51	5,013.85
TOTAL			51	5,013.85

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Schedule Of Purchases

TRADE DATE	SETTLMT DATE	DESCRIPTION	UNITS	COST
	CUSIP # 580135101 MCDONALDS CORP			
10/07/2015	10/13/2015	PURCHASED 203 SHS MCDONALDS CORP ON 10/07/2015 AT 101.4211 THRU MORGAN STANLEY DEAN WITTER COMMISSIONS PAID 1.73	203	20,590.21
	TOTAL		203	20,590.21
	CUSIP # 60871R209 MOLSON COORS BREWING CO-B			
10/13/2015	10/16/2015	PURCHASED 197 SHS MOLSON COORS BREWING CO-B ON 10/13/2015 AT 87.7772 THRU LIQUIDNET INC COMMISSIONS PAID 2.96	197	17,295.07
10/13/2015	10/16/2015	PURCHASED 7 SHS MOLSON COORS BREWING CO-B ON 10/13/2015 AT 88.1638 THRU FIDELITY CAPITAL M COMMISSIONS PAID 0.06	7	617.21
10/13/2015	10/16/2015	PURCHASED 4 SHS MOLSON COORS BREWING CO-B ON 10/13/2015 AT 86.7742 THRU FIRST BOSTON, NY COMMISSIONS PAID 0.03	4	347.13
10/22/2015	10/27/2015	PURCHASED 78 SHS MOLSON COORS BREWING CO-B ON 10/22/2015 AT 88.1731 THRU STIFEL NICOLAUS AND COMPANY COMMISSIONS PAID 3.12	78	6,880.62
	TOTAL		286	25,140.03
	CUSIP # 741503403 PRICELINE GROUP INC			
10/07/2015	10/13/2015	PURCHASED 8 SHS PRICELINE GROUP INC ON 10/07/2015 AT 1283.8563 THRU MORGAN STANLEY DEAN WITTER COMMISSIONS PAID 0.07	8	10,270.92
	TOTAL		8	10,270.92

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SALEM TRUST COMPANY
AS CUSTODIAN FOR THE
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BOSTON COMPANY

Schedule Of Purchases

TRADE DATE	SETTLMT DATE	DESCRIPTION	UNITS	COST
		CUSIP # 87165B103 SYNCHRONY FINANCIAL		
10/26/2015	10/29/2015	PURCHASED 127 SHS SYNCHRONY FINANCIAL ON 10/26/2015 AT 31.05 THRU BT ALEX BROWN INC COMMISSIONS PAID 5.08	127	3,948.43
10/26/2015	10/29/2015	PURCHASED 1 SH SYNCHRONY FINANCIAL ON 10/26/2015 AT 31.0412 THRU FIDELITY CAPITAL M COMMISSIONS PAID 0.01	1	31.05
10/26/2015	10/29/2015	PURCHASED 71 SHS SYNCHRONY FINANCIAL ON 10/26/2015 AT 31.124 THRU SMITH BARNEY INC COMMISSIONS PAID 2.84	71	2,212.64
10/26/2015	10/29/2015	PURCHASED 3 SHS SYNCHRONY FINANCIAL ON 10/26/2015 AT 31.0407 THRU BT ALEX BROWN INC COMMISSIONS PAID 0.03	3	93.15
10/26/2015	10/29/2015	PURCHASED 2 SHS SYNCHRONY FINANCIAL ON 10/26/2015 AT 31.0449 THRU FIRST BOSTON, NY COMMISSIONS PAID 0.02	2	62.11
10/27/2015	10/30/2015	PURCHASED 62 SHS SYNCHRONY FINANCIAL ON 10/27/2015 AT 31.3483 THRU HARRIS NESBITT CORP COMMISSIONS PAID 0.93	62	1,944.52
10/27/2015	10/30/2015	PURCHASED 117 SHS SYNCHRONY FINANCIAL ON 10/27/2015 AT 31.15 THRU BT ALEX BROWN INC COMMISSIONS PAID 1.76	117	3,646.31
10/28/2015	11/02/2015	PURCHASED 127 SHS SYNCHRONY FINANCIAL ON 10/28/2015 AT 31.55 THRU BT ALEX BROWN INC COMMISSIONS PAID 1.91	127	4,008.76

Statement Period	10/01/2015 through 10/31/2015
Account Number	3040001020
	SALEM TRUST COMPANY AS CUSTODIAN FOR THE CITY OF PORT ORANGE GENERAL EMPLOYEES RETIREMENT SYSTEM BOSTON COMPANY

Schedule Of Purchases

TRADE DATE	SETTLMT DATE	DESCRIPTION	UNITS	COST
10/28/2015	11/02/2015	PURCHASED 72 SHS SYNCHRONY FINANCIAL ON 10/28/2015 AT 31.3997 THRU SMITH BARNEY INC COMMISSIONS PAID 2.88	72	2,263.66
10/28/2015	11/02/2015	PURCHASED 559 SHS SYNCHRONY FINANCIAL ON 10/28/2015 AT 31.4603 THRU HARRIS NESBITT CORP COMMISSIONS PAID 8.38	559	17,594.69
10/29/2015	11/03/2015	PURCHASED 303 SHS SYNCHRONY FINANCIAL ON 10/29/2015 AT 30.8722 THRU SMITH BARNEY INC COMMISSIONS PAID 12.12	303	9,366.40
10/30/2015	11/04/2015	PURCHASED 675 SHS SYNCHRONY FINANCIAL ON 10/30/2015 AT 30.7629 THRU MERRILL LYNCH CLEARING CORP COMMISSIONS PAID 10.13	675	20,775.09
10/30/2015	11/04/2015	PURCHASED 4 SHS SYNCHRONY FINANCIAL ON 10/30/2015 AT 30.7433 THRU MERRILL LYNCH, PIERCE, FENNER COMMISSIONS PAID 0.03	4	123.00
10/30/2015	11/04/2015	PURCHASED 37 SHS SYNCHRONY FINANCIAL ON 10/30/2015 AT 30.7426 THRU FIDELITY CAPITAL M COMMISSIONS PAID 0.31	37	1,137.79
10/30/2015	11/04/2015	PURCHASED 20 SHS SYNCHRONY FINANCIAL ON 10/30/2015 AT 30.7178 THRU FIRST BOSTON, NY COMMISSIONS PAID 0.17	20	614.53
10/30/2015	11/04/2015	PURCHASED 5 SHS SYNCHRONY FINANCIAL ON 10/30/2015 AT 30.751 THRU BEAR STEARNS AND CO COMMISSIONS PAID 0.04	5	153.80
10/30/2015	11/04/2015	PURCHASED 53 SHS SYNCHRONY FINANCIAL ON 10/30/2015 AT 30.76 THRU HARRIS NESBITT CORP COMMISSIONS PAID 0.79	53	1,631.07

Statement Period	10/01/2015 through 10/31/2015
Account Number	3040001020

SALEM TRUST COMPANY
AS CUSTODIAN FOR THE
CITY OF PORT ORANGE GENERAL
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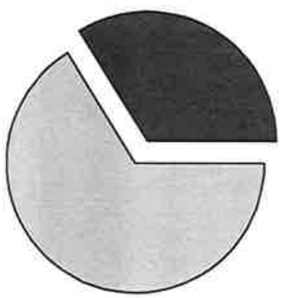
Schedule Of Purchases

TRADE DATE	SETTLMT DATE	DESCRIPTION	UNITS	COST
10/30/2015	11/04/2015	PURCHASED 3 SHS SYNCHRONY FINANCIAL ON 10/30/2015 AT 30.7078 THRU GOLDMAN, SACHS AND CO COMMISSIONS PAID 0.03	3	92.15
	TOTAL		2,241	69,699.15
	CUSIP # 91324P102 UNITEDHEALTH GROUP INC			
10/13/2015	10/16/2015	PURCHASED 130 SHS UNITEDHEALTH GROUP INC ON 10/13/2015 AT 125.4982 THRU LEERINK SWANN AND COMMISSIONS PAID 5.20	130	16,319.97
	TOTAL		130	16,319.97
TOTAL COMMON STOCK			8,856	536,780.16
FOREIGN STOCK				
	CUSIP # G27823106 DELPHI AUTOMOTIVE PLC			
10/07/2015	10/13/2015	PURCHASED 90 SHS DELPHI AUTOMOTIVE PLC ON 10/07/2015 AT 79.4897 THRU LIQUIDNET INC COMMISSIONS PAID 1.35	90	7,155.42
	TOTAL		90	7,155.42
TOTAL FOREIGN STOCK			90	7,155.42
TOTAL PURCHASES				727,679.35

Statement Period	10/01/2015 through 10/31/2015
Account Number	3040030917
	SALEM TRUST COMPANY AS CUSTODIAN FOR THE CITY OF PORT ORANGE GENERAL EMPLOYEES RETIREMENT SYSTEM HIGHLAND CAPITAL CORE EQUITIES

Schedule Of Purchases

Purchase Allocation



33.8%	**COMMON STOCK**	67,552.00
66.2%	**SHORT TERM INVESTMENTS**	132,291.87
100.0%	Total	199,843.87

Purchase Schedule

TRADE DATE	SETTLMT DATE	DESCRIPTION	UNITS	COST
SHORT TERM INVESTMENTS				
CUSIP # 38141W356 GOLDMAN SACHS FIN SQ PRIME OBLIGATION - ADM				
TOTAL ACTIVITY FROM 10/01/2015 TO 10/31/2015				
		PURCHASED 132,291.87 GOLDMAN SACHS FIN SQ PRIME OBLIGATION - ADM ON 10/31/2015 AT 1.00	132,291.87	132,291.87
TOTAL			132,291.87	132,291.87
TOTAL SHORT TERM INVESTMENTS			132,291.87	132,291.87

Statement Period 10/01/2015 through 10/31/2015
Account Number 3040030917

SALEM TRUST COMPANY
AS CUSTODIAN FOR THE
CITY OF PORT ORANGE GENERAL
EMPLOYEES RETIREMENT SYSTEM
HIGHLAND CAPITAL CORE EQUITIES

Schedule Of Purchases

TRADE DATE	SETTLMT DATE	DESCRIPTION	UNITS	COST
COMMON STOCK				
		CUSIP # 388689101 GRAPHIC PACKAGING HOLDING CO		
10/19/2015	10/22/2015	PURCHASED 4,000 SHS GRAPHIC PACKAGING HOLDING CO ON 10/19/2015 AT 13.7093 THRU LYNCH JONES AND RYAN COMMISSIONS PAID 200.00	4,000	55,037.20
TOTAL			4,000	55,037.20
		CUSIP # 867914103 SUNTRUST BANKS INC		
10/30/2015	11/04/2015	PURCHASED 300 SHS SUNTRUST BANKS INC ON 10/30/2015 AT 41.676 THRU JONESTRADING INSTI COMMISSIONS PAID 12.00	300	12,514.80
TOTAL			300	12,514.80
TOTAL COMMON STOCK			4,300	67,552.00
TOTAL PURCHASES				199,843.87

New Business

2015 Audit Concerns

Mei Fang

From: Donahue, Kent [kdonahue@port-orange.org]
Sent: Monday, October 12, 2015 2:06 PM
To: 'pete@benefits-usa.org'; 'Mei Fang'
Subject: FW: FW: Port Orange General Employees

Follow Up Flag: Follow up
Flag Status: Flagged

Pete and Mei:

Please add this item to the next meeting agenda please.

Thank you,
Kent D.

From: Zach Chalifour [mailto:Zach.Chalifour@JMCo.com]
Sent: Monday, October 12, 2015 2:01 PM
To: Donahue, Kent
Subject: RE: FW: Port Orange General Employees

Kent,

Just to follow up on our discussion, my email below does a fairly good job of summarizing the situation. I'd suggest the Board discuss this as the next meeting in order to decide whether to have Dave Leonard investigate his records further and bill the City in hopes of finding the old records and resolving our audit comment, or to accept the repeat comment given the absence of some documentation related to the level of internal control provided by benefit election forms.

Let me know if you have any additional questions.

Thanks!
Zach

From: Dave Leonard [mailto:davelfla@aol.com]
Sent: Tuesday, September 29, 2015 3:05 PM
To: Zach Chalifour; Carrizales, Heather
Cc: Donahue, Kent
Subject: Re: FW: Port Orange General Employees

Zach -

It does help and it's too bad there was a board meeting yesterday. The next one is not until October 26th, and I most likely will not be attending.

How to proceed is ultimately a question for the Board, as you imply. There is either a time commitment required by the City HR department, or a time and expense requirement on my part, or both. And even then it is uncertain whether 100% of the information would be available.

One question I have for you is whether this needs to be done sometime in the future no matter what, at least in order to receive a clean audit comment on the issue?

(Kent - I can be available by phone for this discussion on the 26th if the Board would like my input).

Best regards,
Dave

On 9/29/2015 2:44 PM, Zach Chalifour wrote:

Hi Dave,

Sorry for not responding sooner; I was out of the office at the end of last week, and have been just catching up on everything after starting this week off sick.

What is most important is certainly the calculations, as you noted, since these related to the position and activity of the plan being correct when all is said and done. However, because the elections are part of the Plan's internal control system, these are relevant for purposes of our testing over internal controls (we had a comment on this last year).

As a result, the plan to move forward with this would likely be one that needs to be made by the board from two options: 1) whether to pursue all of these old forms and get them properly documented and retained moving forward in hopes of getting the audit comment resolved or 2) to just focus on the substantive correctness of the calculations while passing on the election forms and accepting a repeat of our FY14 audit comment related to document retention while continuing to ensure all documentation for new retirees is properly maintained.

This may need to go to the Board for a decision based on the cost it would incur, but those are essentially the top options that I see from our perspective.

Let me know if this helps and of any further questions.

Thanks!
Zach

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Ph: (386) 257-4100 ext. 4468
Email: Zach.Chalifour@JMCo.com

From: Dave Leonard [mailto:davelfla@aol.com]
Sent: Thursday, September 24, 2015 8:44 AM
To: Carrizales, Heather; Zach Chalifour
Cc: Donahue, Kent
Subject: Re: FW: Port Orange General Employees

Hi Zach et al -

Just to clarify, I can get you the calculations fairly easily. It would take a lot of work for me (or Heather, for that matter), to dig up the actual elections by the participants from 7-12 years ago.

So I guess my question to you is what is most important. My opinion (and I'm not an auditor so I am not trying to talk for you) is that reviewing the calculations would be the critical element. It can be pretty reliably assumed that once the participant made his election, it was carried out accurately.

Let me know what you think.

Dave

On 9/23/2015 4:49 PM, Carrizales, Heather wrote:

Good afternoon all,
The only one I had onsite here is Ellen Milholen. I will secure send that to everyone. The rest of the files in question are at our off-site warehouse. We would need to coordinate with the City Clerk's office and schedule a trip down there to retrieve the files. Please let me know if you need us to do this. Thank you!

Heather Carrizales

Heather Carrizales, PHR, IPMA-CP, SHRM-CP
Human Resources Manager
City Of Port Orange
1000 City Center Circle
Port Orange, FL 32129
Phone: (386) 506-5561
Fax: (386) 756-5290
email: hcarrizales@port-orange.org

Teamwork makes the Dream Work!

From: Dave Leonard [mailto:davelfla@aol.com]
Sent: Wednesday, September 23, 2015 9:31 AM
To: Zach Chalifour <Zach.Chalifour@JMCo.com>
Cc: Carrizales, Heather <hcarrizales@port-orange.org>; Donahue, Kent <kdonahue@port-orange.org>
Subject: Re: FW: Port Orange General Employees

CAUTION - This email is from an external sender. Do not open email attachments or click any links from unknown senders.

Hi Zach -

It appears that there 12 on this list that were answered "NO" from Mei.

I probably have information on most of these, although perhaps the completed election forms are not available for some of them.

The calculations and non-completed election forms were previously provided to the Board and/or the City HR department.

Before I start digging around (which I will have to charge the plan for), I am wondering if the information might be more readily available in HR's records.

I am happy to get the information for you, but I would like to explore other options too. If I am to take this on, I need to get the go ahead to do so from Kent, as it would take me an hour or two to assemble, scan and e-mail the information to you.

Please get back to me at your convenience.

Best regards,

Dave

On 9/23/2015 8:55 AM, Zach Chalifour wrote:

Hi Dave,

Hope all is well! Before I check in further with Mei, I was wondering if you might have any documentation related to the below participants which have been denoted "No" regarding their benefit payment calculations? Anything you might have and be able to provide would be a great help.

Thanks and I look forward to working with you again this year!
Zach

From: Mei Fang [mailto:Mei@benefits-usa.org]
Sent: Friday, August 28, 2015 4:31 PM
To: Zach Chalifour; Douglas J. Gillikin
Cc: pete@benefits-usa.org
Subject: RE: MDaemon Warning - not scanned: RE: Port Orange General Employees Pension Plan

Dear all:

I did upload 14 Files which I marked green "Yes" to your web. Just like last year I mentioned that for those retirees who retired early than October, 2008, our office did not have their file (I marked red "No". But, I did Pension Verification every year, I did have proof that they still alive.

If you have any questions, please free to contact with me. Thank you.

Best regards,

Mei Fang
Benefits USA, Inc.
3810 Inverrary Blvd., Suite 303
Lauderhill, FL 33319
Phone: 954-730-2068 x201
Toll Free: 800-452-2454 x201
Fax: 954-730-0738
Email: mei@benefits-usa.org

From: Zach Chalifour [mailto:Zach.Chalifour@JMCo.com]
Sent: Tuesday, August 04, 2015 1:17 PM
To: Mei Fang
Cc: Douglas J. Gillikin; pete@benefits-usa.org
Subject: RE: MDaemon Warning - not scanned: RE: Port Orange General Employees Pension Plan

Thanks Mei for the super-quick response! The employees for whom we'd like to look at the Retirement Calculation and Benefit Election forms are as follows.

I've include a link to securely upload the files direct to us in lieu of an email attachment as well: Click here to upload files.

1.	Dennis Dearborn	**No**
2.	Alberta Ellis	**No**
3.	James Franklin	**Yes**
4.	William Groom	**No**
5.	Steven Huntt	**Yes**
6.	Kathryn Kincaid	**No**
7.	Michael Koch	**Yes**
8.	Steven Levine	**Yes**
9.	Dennis McCurry	**Yes**
10.	Ellen Milholen	**No**
11.	Annie Norris	**Yes**
12.	Kenneth Parker	**Yes**
13.	Janice Parsons	**Yes**
14.	Micahel Peace	**Yes**
15.	Warren Pike	**Yes**
16.	Henrica Sheffield	**Yes**
17.	John Shelley	**Yes**
18.	Thomas Sheward	**No**
19.	Glenn Smith	**No**
20.	Margaret Sneddon	**No**
21.	Gerald Taylor	**No**
22.	Glen Walker	**No**
23.	Dorothy Whitmarsh	**No**
24.	Robert Zidnicki	**No**
25.	Marceda Zurawski	**Yes**

Thanks a bunch!
Zach

Zach Chalifour, CPA

James Moore
Certified Public Accountants and Consultants

121 Executive Circle, Daytona Beach, FL 32114-1180
Ph: (386) 257-4100 ext. 4468
Email: Zach.Chalifour@JMCo.com

From: Mei Fang [mailto:Mei@benefits-usa.org]
Sent: Tuesday, August 04, 2015 11:21 AM
To: Zach Chalifour
Cc: Douglas J. Gillikin; pete@benefits-usa.org
Subject: MDaemon Warning - not scanned: RE: Port Orange General Employees Pension Plan
Importance: High

SecurityPlus for MDaemon was not able to scan message attachment

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******************************* WARNING *******************************

The message has been scanned by SecurityPlus for MDaemon and was found to contain an attachment that could not be scanned. Information on the attachment and action taken is provided below.

******************************* WARNING *******************************

Attachment Virus name Action taken

Port Orange 06.01.15 CH R.pdf password-protected Nothing

Dear all:

Here you go.

Best regards,

Mei Fang
Benefits USA, Inc.
3810 Inverrary Blvd., Suite 303
Lauderhill, FL 33319
Phone: 954-730-2068 x201
Toll Free: 800-452-2454 x201

Fax: 954-730-0738
Email: mei@benefits-usa.org

From: Zach Chalifour [mailto:Zach.Chalifour@JMCo.com]
Sent: Tuesday, August 04, 2015 10:37 AM
To: Mei Fang (Mei@benefits-usa.org)
Cc: Douglas J. Gillikin
Subject: Port Orange General Employees Pension Plan

Hi Mei,

Hope all is well! In preparation for this year's Port Orange General Employees Pension Plan audit and to ease the process as much as possible by getting work done in advance to the extent we can, I was wondering if you would be able to provide a benefit payment register for the month of June?

If you can provide that at your convenience, we will go ahead and select a sample of employees for whom we would like to test the benefit payments and send you that list. If you can then send us the participant benefit calculation forms for our selection via email, we will be able to begin and get that testing all wrapped up in advance to streamline the process this fall! ☺

Let me know if you have any questions and I look forward to hearing back from you.

Thanks!
Zach

Zach Chalifour, CPA
James Moore
Certified Public Accountants and Consultants
121 Executive Circle, Daytona Beach, FL 32114-1180
Ph: (386) 257-4100 ext. 4468
Email: Zach.Chalifour@JMCo.com

This message and any attachments are intended only for the individual to whom it is addressed. They are confidential and may be privileged information. If you are neither the intended recipient nor the agent responsible for delivering the message to the intended recipient you are hereby notified that any dissemination of this communication is strictly prohibited and may be unlawful. If you feel you have received this communication in error please notify us immediately by returning this email to the sender and deleting it out of your email.
Thank You.
James Moore & Co P.L.
****

PLEASE NOTE: Florida has a very broad public records law. Most written communications to or from City of Port Orange officials and employees regarding public business are public records available to the public and media upon request. Your e-mail communications may be subject to public disclosure. Under Florida law, e-mail addresses are public records. If you do not want your e-mail address released in response to a public

New Business

Christopher Kucera – Normal Retire Payment for Approval

FIRST STATE TRUST COMPANY - PENSION SET-UP/CHANGE FORM

PLAN NAME: City of Port Orange General Employees' Pension Plan

A. Recipient Name CHRISTOPHER KUCERA **Social Security #** ______

Date of Death ______ **Start Date** 2-1-2016 **Account #** ______

Primary (P) Address: Street: ______ City: ______ State: ______ Country: ______ Zip: ______

Secondary Address: *(Bank Address)* *for ACH* Line 1: ______ Line 2: ______ Street: ______ City: ______ State: ______ Country: ______ Zip: ______

For seasonal address changes, indicate dates for primary (P) and secondary (S) address: Start (P) ______ End (P) ______ Start (S) ______ End (S) ______

Mail Check to: ______(P/S)
Mail Tax form to: ✓ (P/S)

B. Payment Terms

Payment Reasons: *(Please check one)*
- ✓ Normal (7)
- ______ Disability (3)
- ______ Early Distribution w/ Exception (2)
- ______ Early Distribution NO Exception (1)
- ______ (4) Death Benefit as Beneficiary of:

Name: Kynah R. Cockeroft
S.S. No. ______
Date of Death: ______
Was Deceased Receiving Benefits? ______ (Y/N)

Pay Method: *(Please check one)*
- (H) ______ Check mailed to participant
- (A) ______ Check mailed to bank (w/Advice)
- (D) ✓ ACH Payment to Checking Account (w/ Advice)
- (T) ______ ACH Payment to Savings Account (w/ Advice)

ACH Bank #: ______ **ACH Acct #:** ______
(A voided check must be attached to this form)

C. Payment Details

Pay Source:	Amount To Pay	Begin Date	End Date
Taxable (Employer Contrib)	$2,853.87	2-1-2016	Life Annuity
Taxable (Employer Contrib)	$385.33	2-1-2016	"
Employee Contributions			
Employee Contributions			
Other ______			
Gross Benefit	$3,239.20		

D. Deductions

	Amount To Pay	Begin Date	End Date
Federal Tax Withholding*	W-4P plus $200.—	2-1-2016	Life Annuity
State Tax Withholding			
Life Insurance**			
Medical Insurance**			
Dental Insurance**			
Other ______			

* W4 must be attached if withholding is to be calculated using tax tables

** A mailing address must be provided.

E. Participant Info:
Participant Status:
- (1) ✓ Active (Receiving payments)
- (2) ______ Active (Payments suspended)
- (7) ______ Deceased

F. Special Check Info: (Retro check)
$ amount owed: ______

G. Authorized Signatures

______ **Authorized Signature** ______ **Date** ______ **Authorized Signature** ______ **Date**

RETIREMENT CALCULATION FOR CITY OF PORT ORANGE
GENERAL EMPLOYEES
DEFINED BENEFIT RETIREMENT PLAN

	Christopher G. Kucera		*Actuarial Eqiv.* *larger benefit*
	Date of Birth		
	Date of Pension Eligibility	08/19/1985	
	Date of Participation	10/01/2003	
	Date of Retirement	01/31/2016	
	Normal Retirement Date	11/01/2015	
	Salary History years ending 9/30 -		
	2009	$54,849.61	
	2008	53,623.91	
	2007	52,102.64	
	2006	51,173.51	
	2005	50,766.24	
	Total Salaries	$262,515.91	
(a)	Average Monthly Salary	4,375.27	
	Dates of Early Retirement		
	For Service	10/01/2015	
	For Actuarial Equiv	10/01/2009	
(b)	Service	30.0833	
(b2)	Service Prior to 9/30/09	24.0833	- to 10/1/09
(c)	Accrued Benefit (a) x (b) x 2.12% (2.0% after 10/1/09)	2,758.90	
(d)	Actuarial Increase Factor	103.44%	
(e)	Deferred Retirement Ben. (c) x (d)	2,853.87	- March 1, 2010
(f)	Supplemental Benefit $16 x (b2)	385.33	
(g)	Total Accrued Benefit (e) + (f)	3,239.20	
	Prior Plan Guarantee available Lump		$78,164.81
	Monthly Benefit if Lump taken (w/ Supp)		$2,485.89

RICHARD BLUM ASA MAAA
Richard Blum
11/30/15

11/30/15
DAVID Leonard

RETIREMENT CALCULATION FOR CITY OF PORT ORANGE
GENERAL EMPLOYEES
DEFINED BENEFIT RETIREMENT PLAN

Christopher G. Kucera

direct calc -
/- lower benefit

	Date of Birth		
	Date of Pension Eligibility	08/19/1985	
	Date of Participation	10/01/2003	
	Date of Retirement	01/31/2016	
	Normal Retirement Date	11/01/2015	
	Salary History years ending 9/30 -		
	2015	$54,849.61	
	2014	53,623.91	
	2013	52,102.64	
	2012	51,173.51	
	2011	50,766.24	
	Total Salaries	$262,515.91	
(a)	Average Monthly Salary	4,375.27	
	Service Date -	01/31/2016	4375.27 x 24.083 x .0212 = 2233.86
(b)	Service	30.4167	4375.27 x 6.333 x .02
(b2)	Service Prior to 9/30/09	24.0833	= 554.17
(c)	Accrued Benefit (a) x (b) x 2.12% (2.0% after 10/1/09)	2,788.06	Σ = 2788.06
(d)	Supplemental Benefit $16 x (b2)	385.33	
(e)	Total Accrued Benefit (c) + (d)	3,173.39	

Prior Plan Guarantee available Lump $78,164.81

Monthly Benefit if Lump taken (w/ Supp) $2,420.08

RICHARD BLUM ASA MAAA
Richard Blum
11/30/15

11/30/15
DAVID Leonard

CHRISTOPHER KUCERA - # FL113

PARTICIPANT'S ELECTION FOR DISTRIBUTION

I have read the Safe Harbor Act Notice and the Methods of Distribution Options explaining the options available to me as a participant in the CITY OF PORT ORANGE GENERAL EMPLOYEES EMPLOYEES PENSION PLAN. I will receive the benefits described in either Sections A or B, plus the supplemental benefit. I am guaranteed to receive my contributions and interest account - $52,064.53.

I understand these options and agree to receive the benefits due me in the following form:

CHECK ONLY ONE BOX IN SECTION A or SECTION B

You will receive the Supplemental Benefit regardless of your other selections.

[x] **Supplemental Benefit:** A monthly benefit of $385.33, beginning February 1, 2016, payable for the rest of your life. This benefit is in addition to the monthly benefit chosen below in Section A or Section B. (The value of this benefit is included in the relative value amounts shown below.)

A. REFUND OF GUARANTEED MPP TRANSFER plus REDUCED ANNUITY PAYMENT:

Your MPP transfer was $78,164.81. If you choose this option you will also receive a reduced monthly benefit as chosen below. Please select a monthly benefit that will be paid ***in addition to*** the above lump sum:

[ ] **Life Annuity:** a monthly payment of $2,100.56 for my lifetime only, beginning on February 1, 2016, plus a refund of my MPP transfer of $78,164.81. (The relative value of this payment is $336,105)

[ ] **Ten Years Certain and Life Annuity:** a monthly payment of $1,961.89 guaranteed for my lifetime - or 10 years - whichever is longer, beginning on February 1, 2016, plus a refund of my MPP transfer of $78,164.81. (The relative value of this payment is $336,105, or 100% of the Normal Form)

[ ] **Joint and Survivor Annuity:** a reduced monthly payment guaranteed to me and my spouse/beneficiary beginning on February 1, 2016, plus a refund of my MPP transfer of $78,164.81. The annuity will be for my lifetime and continuing to my survivor. (The relative value of this payment is $336,105, or 100% of the Normal Form)

CHECK ONE OPTION ONLY:

[ ]	$1,827.63	with 50% continuing to my spouse (relative value = 100%)
[ ]	$1,716.13	with 75% continuing to my spouse (relative value = 100%)
[ ]	$1,617.46	with 100% continuing to my spouse (relative value = 100%)

We have used ~~ouse~~ Kynah Rene Cockcroft's date of birth.

FRIEND

Note: Relative Value Calculations made using 8% interest and the 83-GAM Male Mortality Table, and include the Supplemental Benefit and MPP Refund (if applicable).

Participant Initial Page 1 benefit election: CK Dated: 12-2-2015

PARTICIPANT'S ELECTION FOR DISTRIBUTION

Continued

B. **ANNUITY PAYMENT (*no* refund of MPP/RCMA transfer):**

[X] **Life Annuity:** a monthly payment of $2,853.87 for my lifetime only, beginning on February 1, 2016. (The relative value of this payment is $336,105)

[ ] **Ten Years Certain and Life Annuity:** a monthly payment of $2,665.48 guaranteed for my lifetime - or 10 years - whichever is longer, beginning on February 1, 2016. (The relative value of this payment is $336,105, or 100% of the Normal Form)

[ ] **Joint and Survivor Annuity:** a reduced monthly payment guaranteed to me and my spouse/beneficiary beginning on February 1, 2016. The annuity will be for my lifetime and continuing to my survivor. (The relative value of this payment is $336,105, or 100% of the Normal Form)

CHECK ONE OPTION ONLY:

[ ]	$2,483.06	with 50% continuing to my spouse (relative value = 100%)
[ ]	$2,331.58	with 75% continuing to my spouse (relative value = 100%)
[ ]	$2,197.53	with 100% continuing to my spouse (relative value = 100%)

We have used November 29, 1962 as ~~spouse~~ FRIEND Kynah Rene Cockcroft's date of birth.

Note: Relative Value Calculations made using 8% interest and the 83-GAM Male Mortality Table, and include the Supplemental Benefit (if applicable)

Please fill in the information below to confirm your election and enable us to process your benefit payment.

Social Security No.: ____________

Christopher D Kucera
Participant Signature

Witness Signature

12-2-2015
Date

Beneficiary Information: NO BENEFICIARY

My beneficiary is Kynah Rene Cockcroft (~~spouse~~), per my Retirement Application.
FRIEND

CHRISTOPHER KUCERA - # FL113

EXPLANATION OF JOINT AND SURVIVOR ANNUITY

If you are married, you will receive from the Plan, unless you elect otherwise, a benefit in the form of a Joint and Survivor Annuity. This form of payment provides you with monthly payments for your life and, upon your death, a monthly payment during your spouse's life equal to 50% of the monthly payment you received prior to your death. The financial effect of a Joint and Survivor Annuity is to reduce the monthly payments you would otherwise have received had payments been made to you as a Single Life Annuity.

You may elect in writing not to receive your benefits as a Joint and Survivor Annuity. **YOU MUST MAKE THIS ELECTION DURING THE 180 DAY PERIOD BEFORE YOUR BENEFITS ARE DUE TO BE PAID.** However, your spouse must consent in writing before a Plan Representative or Notary Public to your election.

Please note, if you elect not to receive your benefits in the form of a Joint and Survivor Annuity, it is possible that no benefits will be paid to your surviving spouse upon your death.

If you are not married please so indicate below and disregard the following two sections of this form.

[X] I am not married. Christopher D Kucera 12-2-2015

Participant's Signature Date

ELECTION TO WAIVE JOINT AND SURVIVOR ANNUITY

As a Participant in CITY OF PORT ORANGE GENERAL EMPLOYEES EMPLOYEES PENSION PLAN, I hereby acknowledge that I have been informed by the Administrator that my benefits under the Plan would normally be paid to me in the form of a Joint and Survivor Annuity; that I have the right to waive that form of payment, provided that my spouse consents in writing to the waiver; that I understand the terms of a Joint and Survivor Annuity and the financial effect of a waiver; and that I may revoke any waiver in effect.

[ ] I hereby elect to waive the Joint and Survivor Annuity Form of payment.

Witness Participant Date

CONSENT OF SPOUSE TO ELECT OUT OF JOINT AND SURVIVOR ANNUITY

I have read the Explanation of Joint and Survivor Annuity provided to my spouse. I understand that my spouse's election out of a Joint and Survivor Retirement Annuity may result in no benefits payable to me should my spouse die before me. I also understand that, without a restriction on my consent, my spouse may designate a person other than me to receive retirement benefits.

I acknowledge that my spouse may not elect out of the Joint and Survivor Annuity form of payment without my consent. Therefore, with an awareness of my rights to withhold or restrict consent, I hereby give my unrestricted consent to my spouse's election out of a Joint and Survivor Annuity form of retirement benefit and to the naming of any beneficiary which my spouse may choose.

Plan Representative or Notary Public Participant's Spousal Signature Date

CITY OF PORT ORANGE GENERAL EMPLOYEES DEFINED BENEFIT PLAN
APPLICATION FOR PENSION OR DISABILITY BENEFIT

Please be noticed that Each Plan participant is allowed one free retirement benefit calculation. Should the participant require an additional calculation, the participant will need to pay the full actuarial cost to the Pension Plan prior to the actuary preparing the calculation.

PLEASE PRINT OR TYPE:

1.a. Name of Employee: KUCERA (last) CHRISTOPHER (first) GEORGE (middle)

b. Social Security Number: ____

c. Date of Birth: ____ Date Employed: 8/19/1985

b. Last Department You Worked For: PUBLIC WORKS

e. Home Telephone Number: ( ) ____

f. Personal Email Address: ____

g. Cell Phone Number: ( ) ____

h. Home Address: ____
(address and street)
____ A ____
(city, state, zip code)

i. Permanent Address To Which Correspondence Should Be Sent (if different): ____

____

2.a. Are you currently married: Yes ____ No X
(If yes, complete the following for your spouse. If no, complete for your beneficiary.)

b. Name of Spouse/Beneficiary: COCKCROFT (last) KYNAH (first) RENE (middle)

c. Social Security Number: ____

d. Date of Birth: ____ Date of Marriage: ____

3. Contingent Beneficiary:

a. Name & Relationship: DELBONIS MARJORIE ANN - SISTER

b. Social Security Number: ____

c. Address: ____

____

4. Type of Retirement for Which You Are Applying (check one):

✓ Normal Retirement + 2 MONTHS

_______ Early Retirement

_______ Service Incurred Disability

_______ Non-Service Incurred Disability

_______ Deferred Vested Termination

5. I plan to retire on: 1/31/2016

If you are applying for a Disability Benefit:

a. Date disability commenced: _______

b. Nature and cause of disability: _______

c. Did your disability result from any of the following:

YES	NO	
___	___	(1) Use of drugs, intoxicants or narcotics?
___	___	(2) A fight, riot or civil insurrection?
___	___	(3) While you were committing a crime?
___	___	(4) From an injury or disease sustained while you were serving in the armed forces?
___	___	(5) After your employment with the City terminated?
___	___	(6) While working for someone other than the City and arising out of such employment?

NOTE: Records must be filed, including copies of a doctor's opinion, medical records and other documentation to show that the disability is total and permanent, and if application is made for a service-incurred disability, copies of workers' compensation records and other documentation must also be filed to show the disability occurred while performing service-related duties. Also, the Board of Trustees may require you to be examined by a doctor selected by the Board.

I hereby certify that the above statements are true and correct to the best of my knowledge. I understand that a false statement may disqualify me for benefits. I have reviewed the Designation of Beneficiary Form filed with the Board of Trustees and I hereby certify its accuracy. If I desire to change my designated beneficiary(ies), I will file a new Designation of Beneficiary Form with this application. This application revokes any prior applications.

Billy C. Barnes
(Witness' Signature)

[signature]
(Employee's Signature)

Date: 11/12/2015

Consent Agenda

WARRANT NO. 108-15

For payment from the CITY OF PORT ORANGE GENERAL EMPLOYEES' DEFINED BENEFIT PLAN

TO: SALEM TRUST COMPANY

You are hereby authorized by the Board of Trustees of the City of Port Orange General Employees' Defined Benefit Plan to pay the amounts listed below for services rendered to the said Board of Trustees, and to pay the persons named below, hereby certified by the Board of Trustees:

NAME & ADDRESS	AMOUNT
Benefits USA, Inc. (Admin Fees 10-12/2015&Postage; INV #POG081)	$ 7,592.12
Southeastern Advisory (Investment Consulting Services: INV #1503)	$ 4,752.00
Highland Capital Management (4th Qtr '15 Mgmt Fees; INV #10145)	$ 8,434.93
Integrity Fix Income Management (3rd Qtr '15 Mgmt Fees; INV #1962)	$ 3,722.75
The Boston Company (3rd Qtr '15 Mgmt Fees; INV #64541)	$ 9,179.89
David G. Leonard, ASA (Actuarial Services: INV #15-054)	$ 3,000.00
James Moore (2015 Audit INV #540515)	$ 5,000.00
Sonya Laney (Reimb. For FPPTA Trustee School Travel Expense)	$ 620.73

Approved by the following members of the Board of Trustees this 14th day of December 2015

Trustee

Trustee

BENEFITS USA, INC.
3810 Inverrary Blvd., Ste. 303
Lauderhill, FL 33319
(800)452-2454 / (954)730-2068

INVOICE

INVOICE NO.: POG081

Bill To:

CITY OF PORT ORANGE
GENERAL EMPLOYEES'
DEFINED BENEFIT PLAN

Date	Hours	Description	Unit Pr	Total
Oct.-Dec 2015		Monthly Flat Fee		$ 7,500.00
Postage		2015 Pension Annual Certification Request	$0.49 X 77 X 2	$ 75.46
Postage		Outstanding Mandatory Notice	$0.49 X 18	$ 8.33
Postage		2015 Pension Annual Certification Final Request	$0.49 X 9 X 2	$ 8.33

Fees	$ 7,500.00
Reimb.	$ 92.12
Bal Due	**$ 7,592.12**

SOUTHEASTERN ADVISORY SERVICES, INC.
Registered Investment Advisor

12 Piedmont Center, Suite 202
Atlanta, GA 30305
Phone 404 237 3156 Fax 404 237 2650

DATE: October 1, 2015
INVOICE # 1503
FOR: 3Q15

Bill To:
Mr. Pete Prior / Ms. Mei Fang
Port Orange General Employees' DB Fund
Benefits USA
3810 Inverrary Blvd, Ste 208
Lauderhill, FL 33319
cc: salemops@salemtrust.com

DESCRIPTION	AMOUNT
Performance Measurement and Related Investment Consulting Services Retainer Fee $19,006 Per Year (19,006 / 4 = $4,752) Invoice calculations are rounded to the nearest dollar Retainer fee increases based on CPI each calendar year	$4,752
TOTAL	$4,752

Please send your payment to:

Southeastern Advisory Services, Inc.
3495 Piedmont Road, NE Bldg 12-202
Atlanta, GA 30305

If you have any questions concerning this invoice, contact:
Jeff Swanson, 904 233 7600, jeff@seadvisory.com

Thank you for your business!

Highland Capital
MANAGEMENT, LLC

October 5, 2015

Invoice Number: 10145

MANAGEMENT FEE: PORT ORANGE EMPLOYEES' RETIREMENT SYSTEM VALUE

9/30/2015 Portfolio Value:		$ 6,747,944.96
Quarterly Fee Based On:		
$ 6,747,945 @ 0.50% per annum	$ 8,434.93	
Quarterly Fee:		$ 8,434.93
For the Period 10/1/2015 through 12/31/2015		
	Paid by Debit Direct	($ 0.00)
	Please Remit	$ 8,434.93

Wiring Instructions:

First Tennessee Bank

ABA# 084000026

Acct# 31-0251313

For Credit to: Highland Capital Management, LLC.

Mailing Check:

Highland Capital Management, LLC

6075 Poplar Ave, Suite 703

Memphis, TN 38119

Integrity Fixed Income Management, LLC
651 Bryn Mawr Street
Orlando, FL 32804
(407) 481-2403

Invoice

Benefits USA, Inc.
Attn: Mei Fang c/o Port Orange General Employee Pension
3810 Inverrary Blvd., Suite 103
Lauderhill, FL 33319

Invoice # 1962

10/16/2015

Port Orange General Employee Pension
Statement of Management Fees
For Quarter Ended September 30, 2015

Date	Portfolio Value	Annual Fee	Quarterly Fee	# of Days Prorated	% of Quarter	Prorated Fee
9/29/2015	$5,958,790	$14,896.97	$3,724.24	90	98.9%	3,683.32
9/30/2015	$5,741,790	$14,354.47	$3,588.62	1	1.1%	39.44
				91	**100.0%**	**$3,722.75**

Annual Fee Schedule
0.25% on balance

Quarterly Management Fee Due **$3,722.75**

THE BOSTON COMPANY

ASSET MANAGEMENT, LLC

A BNY Mellon Company℠

10/16/2015
Invoice 64541

Mei Fang
Benefits USA, Inc.
3810 Inverrary Blvd., Suite 303
Lauderhill, FL 33319

CITY OF PORT ORANGE GENERAL EMPLOYEES RETIREMENT PLAN

This fee is calculated in accordance with terms set forth in the contract between The Boston Company Asset Management, LLC and Client.

Billing Period	**07/01/2015 - 09/30/2015**
Account Name	**Amount due**
CITY OF PORT ORANGE GENERAL EMPLOYEES RETIREMENT PLAN	$ 9,179.89
Total:	**$ 9,179.89**

Total Due for Current Period: **$ 9,179.89**

The following is a statement of transactions pertaining to your account(s).

For any questions pertaining to this bill, please contact the Billing Department at (617) 722-3570 or email us at Billing@bnymellon.com. Thank you.

Remittance Slip

Invoice Number:	**64541**	Billing Period:	**07/01/2015 - 09/30/2015**
Invoice Date:	**10/16/2015**	**Account Number:**	**BOS1543**

Amount Due: **$ 9,179.89**

Please Wire Transfer To:

BNY Mellon, N.A.
ABA # 011-00-1234
SWIFT IRVTUS3N
Further Credit to:
The Boston Company Asset Management, LLC
A/C #: 000010-4388

Please reference invoice number in wire transmission

Make Check Payable To:

The Boston Company Asset Management, LLC
Attn: Accounts Receivable
One Boston Place
Post Office Box 55868
Boston, MA 02205-8282

Invoice 64541

CITY OF PORT ORANGE GENERAL
EMPLOYEES RETIREMENT PLAN

Billing Detail

Billing period:
07/01/2015 - 09/30/2015

Invoice date:
10/16/2015

CITY OF PORT ORANGE GENERAL EMPLOYEES RETIREMENT PLAN - BOS1543

US Large Cap Growth Equity SM

Management fee

Activity	Date	Basis in USD
Market value	09/30/2015	7,343,907.35
Total Basis:		**$ 7,343,907.35**

Annual Fee Calculation in USD (adjusted by: 90 / 360)

	Fee Schedule Tiers	Annual (%)	Applied Assets	Annual Fee	Periodic Fee
	0.00 and above	0.500000	7,343,907.35	36,719.54	9,179.89
Totals:			**$ 7,343,907.35**	**$ 36,719.54**	**$ 9,179.89**

Billing Summary	
Management fee	$ 9,179.89
Total Current Charges:	**$ 9,179.89**

David G. Leonard, A.S.A.

533 N. Nova Rd. - Suite 207
Ormond Beach, FL 32174
(386) 206-8932

Invoice

Date	Invoice #
10/13/2015	15-054

Bill To	
City of Port Orange Kent Donahue, Chairman 1000 City Center Circle Port Orange, FL 32129	
Our File Number:	FL-113

Item	Description	Qty	Rate	Amount
Trust Accounti...	Trust Accounting for Quarter Ended September 30, 2015		2,500.00	2,500.00
Dist	Retirement Calculations - P. Riley, F. Griffith (#15 and #16)	2	175.00	350.00
Dist	Employee Distribution - Mandatory Cons. - Leisler, Forbes	2	75.00	150.00

Please make check payable to
"David G. Leonard, A.S.A., LLC"

Total $3,000.00

James Moore
Certified Public Accountants and Consultants

5931 NW 1st Place, Gainesville, Florida 32607-2063
Daytona Beach: 386-257-4100 * Gainesville: 352-378-1331 * Tallahassee: 850-386-6184

City of Port Orange General Employees Defined
Benefit Retirement Plan - c/o Benefits USA Inc
3810 Inverrary Blvd Ste 303
Lauderhill, FL 33319-4381

Invoice Date: 11/30/2015

Invoice Number: 540515
Client Number: 202586

Professional services rendered in connection with the audit of the Plan's financial statements for the year ended September 30, 2015
For work performed through November 2015 - progress billing.

	$ 5,000.00
Beginning Balance	0.00
Net Due	$ 5,000.00

0 - 30	31- 60	61 - 90	91 - 120	Over 120	Balance
5,000.00	0.00	0.00	0.00	0.00	5,000.00

PLEASE MAIL CHECKS TO JAMES MOORE, 5931 NW 1st PL, GAINESVILLE, FL, 32607-2063

NET DUE AND PAYABLE UPON RECEIPT. A FINANCE CHARGE OF 1 ½% PER MONTH WILL BE ADDED
ON PAST DUE AMOUNTS, WHICH IS AN ANNUAL PERCENTAGE RATE OF 18%.
EIN # 59-3204548

Welcome,
Sonya Laney

ROOM INFORMATION:

1 KING BED EXECUTIVE FLOOR, Non-Smoking Confirmed

Rooms: 1

Guests: 1 Adult

Check In: 3:00 PM

Check Out: 12:00 PM

RATE INFORMATION:

ADVANCE PURCHASE

Rate per night:	188.10 USD
Total for Stay per Room	
Rate:	564.30 USD
Taxes:	56.43 USD
Total:	620.73 USD
Total for Stay:	620.73 USD

Includes estimated taxes. (Gratuities not included)

Mandatory Plan Distributions

City of Port Orange General Employees Pension Plan

Outstanding Mandatory and Voluntary Accounts
for Retireds and Terminations

Mandatory Employee Contributions - DB Plan

	Name	Term Date	09/30/2014 Refund Due
6	Amado Cotto	02/26/2014	$517.42
3	Eleanor Coyne	11/05/2004	778.37
	Joshua Eddy	contrib. in error	88.02
	Stephen Edwards	09/22/2011	20.45
	William Farley	10/14/2004	858.50
	David Ferguson	05/11/2007	2,442.25
5	Charles Garay	07/12/2013	997.44
	Michael Leissler	07/14/2014	2,558.15
	Lee McFarland	08/28/2008	58.85
	Chase Routte	07/18/2014	4,161.80
	Jeffrey Starr	11/05/2004	556.24
	Michael Bussey	2nd*	3.49
4	Stephen Edwards	2nd	20.45
2	Ronald Ferrer	2nd	166.14
	Timothy Sidler	2nd	93.06
	Christopher Williams	2nd	56.99
1	Carla Wright	2nd	207.57
	Connie Young	2nd	8.30
			$13,593.49

Voluntary Accounts

Name	TM/Retired	09/30/2014
John Diamond	Tm - 5/23/13	431.94
James Foster	Ret - 4/1/11	180,779.80
James Franklin	Ret. - 6/28/13	227.47
Steven Levine	Ret - 5/10/13	154,235.60
Kevin Mouyard	Tm - 4/5/06	11,023.37
John Shelley	Ret. - 1/11/13	61,759.51
Roger Smith	Tm - 3/8/13	1,316.29
Donna Steinebach	Ret. 8/1/15	146,268.12
		$556,042.10

* 2nd payments due to additional contributions
deposited after termination calculation prepared.

LUMP SUM DISTRIBUTION REQUEST

PLAN NAME CITY OF PORT ORANGE GE Pension Fund	**PLAN ACCOUNT NUMBER** 304006[illegible]02

PAYMENT TYPE: Total Distribution	**PAYEE'S SOCIAL SECURITY #:**	**TAXABLE AMT NOT DETERMINED** ☐

PAYEE TAX ADDRESS: **Mail to Payee:** ☐Yes ☐No	**ROLLOVER DISTRIBUTION ADDRESS:** ROLLOVER INSTITUTION: ROLLOVER ACCT #:
NAME Eleanor Coyne	PAYABLE TO:
ADDRESS	ADDRESS
ADDRESS 2	ADDRESS 2
CITY	CITY
STATE / ZIP CODE	STATE / ZIP CODE
Participant is a Public Safety Officer: ☐Yes ☒No	**REQUESTED PAYMENT DATE:** / /
Disability or Death Due to In-Line Duty: ☐Yes ☒No	IRS DISTRIBUTION CODE:
DEPOSIT CODE: ACH	DATE OF BIRTH / / ; DATE OF TERMINATION 11/05/2004
ACH INFORMATION: ACCOUNT TYPE: Checking Financial Institution: ABA #: Account #:	☐ NON US CITIZEN – (IRS W-8BEN needs to be sent with distribution request and original signed form forwarded to Payment Services) COUNTRY:____
MAIL TO OTHER ADDRESS: Address: City: State: Zip Code:	☒ US CITIZEN – (Certified by the participant by completing and signing IRS form W-9)

PAYMENT INFORMATION:	AMOUNT
Total Gross Amount	$778.37
Total Taxable	$778.37
Non-Taxable EEC	$0.00
Federal Withholding	$155.67
State Tax Withholding	$
Other Deductions	$
Total Net Check	$622.70

WITHHOLDING DETAIL:			
1	FED TAX:	FED TAX METHOD	20% OF TAXABLE
		Additional Withholding Amount	$
2	TAX STATE		
		STATE TAX METHOD	Select One
		Addtl Withholding Amount	$
		Percentage	%

COMMENTS:

AUTHORIZATION BY PLAN ADMINISTRATOR:

I hereby certify that this is an appropriate request under the plan, income tax withholding information and an election form has been provided to the payee, spousal consent has been obtained when appropriate, any other required information regarding this distribution has been provided to the payee, and the above information is correct to the best of my knowledge.

DATE__________ AUTHORIZED SIGNATURE ____________________

DATE__________ AUTHORIZED SIGNATURE ____________________

DATE AUTHORIZED BY SALEM TRUST ____________________ Prepared By:

ST
SALEM TRUST
COMPANY

LUMP SUM DISTRIBUTION REQUEST

PLAN NAME CITY OF PORT ORANGE GE[illegible]nsion Fund

PLAN ACCOUNT NUMBER 30400[illegible]02

PAYMENT TYPE: Total Distribution

PAYEE'S SOCIAL SECURITY #:

TAXABLE AMT NOT DETERMINED ☐

PAYEE TAX ADDRESS: Mail to Payee: ☐Yes ☐No	**ROLLOVER DISTRIBUTION ADDRESS:** ROLLOVER INSTITUTION: ROLLOVER ACCT #:
NAME Stephen Edwards	PAYABLE TO:
ADDRESS	ADDRESS
ADDRESS 2	ADDRESS 2
CITY	CITY
STATE / ZIP CODE	STATE / ZIP CODE
Participant is a Public Safety Officer: ☐Yes ☒No	**REQUESTED PAYMENT DATE:** / /
Disability or Death Due to In-Line Duty: ☐Yes ☒No	IRS DISTRIBUTION CODE:
DEPOSIT CODE: ACH	DATE OF BIRTH / / ; DATE OF TERMINATION 09/22/2011
ACH INFORMATION: ACCOUNT TYPE: Checking	
Financial Institution:	☐ NON US CITIZEN – (IRS W-8BEN needs to be sent with distribution request and original signed form forwarded to Payment Services) COUNTRY:____
ABA #: / Account #:	
MAIL TO OTHER ADDRESS:	
Address:	☒ US CITIZEN – (Certified by the participant by completing and signing IRS form W-9)
City: / State:	
Zip Code:	

PAYMENT INFORMATION:	AMOUNT
Total Gross Amount	$20.45
Total Taxable	$20.45
Non-Taxable EEC	$0.00
Federal Withholding	$4.09
State Tax Withholding	$
Other Deductions	$
Total Net Check	$16.36

WITHHOLDING DETAIL:

1	FED TAX:	FED TAX METHOD	20% OF TAXABLE
		Additional Withholding Amount	$
2	TAX STATE		
		STATE TAX METHOD	Select One
		Addtl Withholding Amount	$
		Percentage	%

COMMENTS:

AUTHORIZATION BY PLAN ADMINISTRATOR:

I hereby certify that this is an appropriate request under the plan, income tax withholding information and an election form has been provided to the payee, spousal consent has been obtained when appropriate, any other required information regarding this distribution has been provided to the payee, and the above information is correct to the best of my knowledge.

DATE____________ AUTHORIZED SIGNATURE ____________________

DATE____________ AUTHORIZED SIGNATURE ____________________

DATE AUTHORIZED BY SALEM TRUST ________________ Prepared By:

ST
SALEM TRUST
COMPANY

LUMP SUM DISTRIBUTION REQUEST

PLAN NAME CITY OF PORT ORANGE GE Pension Fund	**PLAN ACCOUNT NUMBER** 30400[illegible]02

PAYMENT TYPE: Total Distribution	**PAYEE'S SOCIAL SECURITY #:**	**TAXABLE AMT NOT DETERMINED** ☐

PAYEE TAX ADDRESS:	**Mail to Payee:** ☐Yes ☐No	**ROLLOVER DISTRIBUTION ADDRESS:**	ROLLOVER INSTITUTION: ROLLOVER ACCT #:
NAME Ronald Ferrer		PAYABLE TO:	
ADDRESS		ADDRESS	
ADDRESS 2		ADDRESS 2	
CITY		CITY	
STATE	ZIP CODE	STATE	ZIP CODE
Participant is a Public Safety Officer: ☐Yes ☒No		**REQUESTED PAYMENT DATE:**	/ /
Disability or Death Due to In-Line Duty: ☐Yes ☒No		IRS DISTRIBUTION CODE:	
DEPOSIT CODE: ACH		DATE OF BIRTH / /	DATE OF TERMINATION 12/31/2010
ACH INFORMATION:	ACCOUNT TYPE: Checking	☐ NON US CITIZEN – (IRS W-8BEN needs to be sent with distribution request and original signed form forwarded to Payment Services) COUNTRY:_____	
Financial Institution:			
ABA #:	Account #:		
MAIL TO OTHER ADDRESS:		☒ US CITIZEN – (Certified by the participant by completing and signing IRS form W-9)	
Address:			
City:	State:		
Zip Code:			

PAYMENT INFORMATION:	**AMOUNT**	**WITHHOLDING DETAIL:**			
Total Gross Amount	$166.14	1	FED TAX:	FED TAX METHOD	20% OF TAXABLE
Total Taxable	$166.14			Additional Withholding Amount	$
Non-Taxable EEC	$0.00	2	TAX STATE		
Federal Withholding	$33.23			STATE TAX METHOD	Select One
State Tax Withholding	$			Addtl Withholding Amount	$
Other Deductions	$			Percentage	%
Total Net Check	$132.91				

COMMENTS:

AUTHORIZATION BY PLAN ADMINISTRATOR:

I hereby certify that this is an appropriate request under the plan, Income tax withholding information and an election form has been provided to the payee, spousal consent has been obtained when appropriate, any other required information regarding this distribution has been provided to the payee, and the above information is correct to the best of my knowledge.

DATE__________________ AUTHORIZED SIGNATURE ____

DATE__________________ AUTHORIZED SIGNATURE ____

DATE AUTHORIZED BY SALEM TRUST ______________________________ Prepared By:

ST
SALEM TRUST
COMPANY

LUMP SUM DISTRIBUTION REQUEST

PLAN NAME CITY OF PORT ORANGE GE Pension Fund	**PLAN ACCOUNT NUMBER 304006[illegible]2**

PAYMENT TYPE: Total Distribution	**PAYEE'S SOCIAL SECURITY #:**	**TAXABLE AMT NOT DETERMINED** ☐

PAYEE TAX ADDRESS:	**Mail to Payee:** ☐ Yes ☐ No	**ROLLOVER DISTRIBUTION ADDRESS:**	ROLLOVER INSTITUTION: ROLLOVER ACCT #:
NAME Carla Wright		PAYABLE TO:	
ADDRESS		ADDRESS	
ADDRESS 2		ADDRESS 2	
CITY		CITY	
STATE	ZIP CODE	STATE	ZIP CODE
Participant is a Public Safety Officer:	☐ Yes ☒ No	**REQUESTED PAYMENT DATE:**	/ /
Disability or Death Due to In-Line Duty:	☐ Yes ☒ No	IRS DISTRIBUTION CODE:	
DEPOSIT CODE: ACH		DATE OF BIRTH / /	DATE OF TERMINATION 05/27/2011
ACH INFORMATION:	ACCOUNT TYPE: Checking	☐ NON US CITIZEN – (IRS W-8BEN needs to be sent with distribution request and original signed form forwarded to Payment Services) COUNTRY:____	
Financial Institution:			
ABA #:	Account #:		
MAIL TO OTHER ADDRESS:		☒ US CITIZEN – (Certified by the participant by completing and signing IRS form W-9)	
Address:			
City:	State:		
Zip Code:			

PAYMENT INFORMATION:	**AMOUNT**	**WITHHOLDING DETAIL:**			
Total Gross Amount	$207.57	1	FED TAX:	FED TAX METHOD	20% OF TAXABLE
Total Taxable	$207.57			Additional Withholding Amount	$
Non-Taxable EEC	$0.00	2	TAX STATE		
Federal Withholding	$41.51			STATE TAX METHOD	Select One
State Tax Withholding	$			Addtl Withholding Amount	$
Other Deductions	$			Percentage	%
Total Net Check	$166.06				

COMMENTS:

AUTHORIZATION BY PLAN ADMINISTRATOR:

I hereby certify that this is an appropriate request under the plan, income tax withholding information and an election form has been provided to the payee, spousal consent has been obtained when appropriate, any other required information regarding this distribution has been provided to the payee, and the above information is correct to the best of my knowledge.

DATE________________ AUTHORIZED SIGNATURE ________________________________

DATE________________ AUTHORIZED SIGNATURE ________________________________

DATE AUTHORIZED BY SALEM TRUST ________________________ Prepared By:

ST
SALEM TRUST
COMPANY

LUMP SUM DISTRIBUTION REQUEST

PLAN NAME **CITY OF PORT ORANGE GE Pension Fund**

PLAN ACCOUNT NUMBER **3040069902**

PAYMENT TYPE: Total Distribution

PAYEE'S SOCIAL SECURITY #:

TAXABLE AMT NOT DETERMINED ☐

PAYEE TAX ADDRESS:	**Mail to Payee:** ☐Yes ☐No	**ROLLOVER DISTRIBUTION ADDRESS:**	ROLLOVER INSTITUTION: ROLLOVER ACCT #:
NAME Charles W. Garay		PAYABLE TO:	
ADDRESS		ADDRESS	
ADDRESS 2		ADDRESS 2	
CITY		CITY	
STATE	ZIP CODE	STATE	ZIP CODE
Participant is a Public Safety Officer: ☐Yes ☒No		**REQUESTED PAYMENT DATE:**	/ /
Disability or Death Due to In-Line Duty: ☐Yes ☒No		IRS DISTRIBUTION CODE:	
DEPOSIT CODE: ACH		DATE OF BIRTH / /	DATE OF TERMINATION
ACH INFORMATION:	ACCOUNT TYPE: Checking	☐ NON US CITIZEN – (**IRS W-8BEN needs to be sent with distribution request and original signed form forwarded to Payment Services**) COUNTRY:____	
Financial Institution:			
ABA #:	Account #:		
MAIL TO OTHER ADDRESS:		☒ US CITIZEN – (Certified by the participant by completing and signing IRS form W-9)	
Address:			
City:	State:		
Zip Code:			

PAYMENT INFORMATION:	**AMOUNT**
Total Gross Amount	$997.44
Total Taxable	$997.44
Non-Taxable EEC	$0.00
Federal Withholding	$199.49
State Tax Withholding	$
Other Deductions	$
Total Net Check	$797.95

WITHHOLDING DETAIL:

1	FED TAX:	FED TAX METHOD	20% OF TAXABLE
		Additional Withholding Amount	$
2	TAX STATE		
		STATE TAX METHOD	Select One
		Addtl Withholding Amount	$
		Percentage	%

COMMENTS:

AUTHORIZATION BY PLAN ADMINISTRATOR:

I hereby certify that this is an appropriate request under the plan, income tax withholding information and an election form has been provided to the payee, spousal consent has been obtained when appropriate, any other required information regarding this distribution has been provided to the payee, and the above information is correct to the best of my knowledge.

DATE________________ AUTHORIZED SIGNATURE ______________________________

DATE________________ AUTHORIZED SIGNATURE ______________________________

DATE AUTHORIZED BY SALEM TRUST ______________________________ Prepared By:

ST
SALEM TRUST
COMPANY

LUMP SUM DISTRIBUTION REQUEST

PLAN NAME CITY OF PORT ORANGE GE Pension Fund	**PLAN ACCOUNT NUMBER** 3040069902

PAYMENT TYPE: Total Distribution	**PAYEE'S SOCIAL SECURITY #:**	**TAXABLE AMT NOT DETERMINED** ☐

PAYEE TAX ADDRESS:	**Mail to Payee:** ☐Yes ☐No	**ROLLOVER DISTRIBUTION ADDRESS:**	ROLLOVER INSTITUTION: ROLLOVER ACCT #:
NAME Amado Cotto		PAYABLE TO:	
ADDRESS		ADDRESS	
ADDRESS 2		ADDRESS 2	
CITY		CITY	
STATE	ZIP CODE	STATE	ZIP CODE
Participant is a Public Safety Officer: ☐Yes ☒No		**REQUESTED PAYMENT DATE:**	/ /
Disability or Death Due to In-Line Duty: ☐Yes ☒No		IRS DISTRIBUTION CODE:	
DEPOSIT CODE: ACH		DATE OF BIRTH / /	DATE OF TERMINATION / /
ACH INFORMATION:	ACCOUNT TYPE: Checking	☐ NON US CITIZEN – (IRS W-8BEN needs to be sent with distribution request and original signed form forwarded to Payment Services) COUNTRY:_____	
Financial Institution:			
ABA #:	Account #:		
MAIL TO OTHER ADDRESS:		☒ US CITIZEN – (Certified by the participant by completing and signing IRS form W-9)	
Address:			
City:	State:		
Zip Code:			

PAYMENT INFORMATION:	**AMOUNT**
Total Gross Amount	$517.42
Total Taxable	$517.42
Non-Taxable EEC	$0.00
Federal Withholding	$103.48
State Tax Withholding	$
Other Deductions	$
Total Net Check	$413.94

WITHHOLDING DETAIL:

1	FED TAX:	FED TAX METHOD	20% OF TAXABLE
		Additional Withholding Amount	$
2	TAX STATE		
		STATE TAX METHOD	Select One
		Addtl Withholding Amount	$
		Percentage	%

COMMENTS:

AUTHORIZATION BY PLAN ADMINISTRATOR:

I hereby certify that this is an appropriate request under the plan, income tax withholding information and an election form has been provided to the payee, spousal consent has been obtained when appropriate, any other required information regarding this distribution has been provided to the payee, and the above information is correct to the best of my knowledge.

DATE________________ AUTHORIZED SIGNATURE ________________________________

DATE________________ AUTHORIZED SIGNATURE ________________________________

DATE AUTHORIZED BY SALEM TRUST ________________________ Prepared By:

ST
SALEM TRUST
COMPANY

Updated 2016 Meeting Schedules

ATTENTION ALL:

Please use this schedule as your guide for the 2016 Board Meetings

2016 CITY OF PORT ORANGE GENERAL PENSION BOARD MEETING DATES

Monday January 25th, 2016 - Regular Meeting

Monday February 22nd, 2016 – Regular Meeting

Monday March 28th, 2016 - Quarterly Meeting

Monday April 25th, 2016 - Regular Meeting

Monday May 23rd, 2015 – Regular Meeting

Monday July 25th, 2016 - Quarterly Meeting

Monday July 25th, 2016 - 2016 Employee Pension Fund Conference

Monday August 22nd, 2016 – Regular Meeting

Monday September 19th, 2016 - Quarterly Meeting

Monday October 24th, 2016 - Regular Meeting

Monday December 12nd, 2016 - Quarterly Meeting