Key Personnel Listing Instructions

Print the instructions and use as a guide to fill out each entry in the attached form. (*) indicates the field is required.

General Information

Today's Date*	Enter the date of the day the form was completed.
Name*	The name of the individual completing the form.
Title	The title of individual completing the form.
Phone Number	The phone number of the individual completing the form. ***Note:*** It will allow the State Controller's Office (SCO) to have a contact concerning the Key Personnel Listing (KPL).

County Information

County Name*	The name of the county.
Physical Address*	The address of the physical location of the office.
City & Zip*	City and Zip that corresponds with the address above.
Mailing Address	If different from physical address, the address where postal mail is to be received.
City & Zip	City and Zip that corresponds with the address above.
Phone Number*	The office phone number.
Fax Number	The office fax number.
Website*	The office's website address.
Office Hours*	Using the drop-down selection tool, select the timeframe that corresponds with the hours of operation at the office.

Request to Change

A county may either add, remove, update, or replace each entry listed on the County's respective page in the Key Personnel Listing (KPL).

Options:

- Add – Select add if the county has added a new position to their organizational chart.
- Remove – Select remove if the county has removed a **position** from their organizational chart.

  Note: List the name, title, and section of the employee that is currently listed on the KPL page.
- Update – Select update if the information of a current employee has changed.
- Replace – Select replace if an employee listed on the KPL is being replaced by another employee.

  Note: If selected, enter the former employee's name where instructed. Enter vacant if the position is currently vacant.

Title*	The title of the individual.
Name*	The name of the individual.
Phone	The office phone number of the individual.
Section*	The division, unit, or section the individual works in at the office.
Email	The work e-mail of the individual.
Fax	Enter **only** if different from the office fax number.

Once the KPL form is completed, save the form to your desktop, and please submit the form using **one** of the following:

Office of the County Treasurer-Tax Collector:

Email – PropertyTax@sco.ca.gov

U.S. Postal Mail
State Controller's Office
Local Government Programs & Services Division
Attn: Property Tax Standards - KPL
P.O. Box 942850
Sacramento, CA 94250-5875

If you have any questions, please contact:
Christopher St. Louis at (916) 322-3226

Note: If there are changes made within the organization during the course of the year, the KPL can be updated at any time using the fillable PDF form on the SCO website.

State of California

Key Personnel Listing

For the Year of 2019

Key Personnel Listing Information Update Request Form

General Information

Today's date

Name

Title

Phone Number

County Information

County Name

Physical Address

City & Zip

Mailing Address

City & Zip

Phone Number

Fax Number

Website

Office Hours

Request to Change:

1.

- ☐ Add
- ☐ Remove
- ☐ Update
- ☐ Replace (Former Employee) _____

Title		Section	
Name		E-Mail	
Phone		Fax	

2.

- ☐ Add
- ☐ Remove
- ☐ Update
- ☐ Replace (Former Employee) _____

Title		Section	
Name		E-Mail	
Phone		Fax	

3.

- ☐ Add
- ☐ Remove
- ☐ Update
- ☐ Replace (Former Employee) _____

Title		Section	
Name		E-Mail	
Phone		Fax	

4.

- ☐ Add
- ☐ Remove
- ☐ Update
- ☐ Replace (Former Employee) _____

Title		Section	
Name		E-Mail	
Phone		Fax	

5.

☐ Add
☐ Remove
☐ Update
☐ Replace (Former Employee)

Title		Section	
Name		E-Mail	
Phone		Fax	

6.

☐ Add
☐ Remove
☐ Update
☐ Replace (Former Employee)

Title		Section	
Name		E-Mail	
Phone		Fax	

7.

☐ Add
☐ Remove
☐ Update
☐ Replace (Former Employee)

Title		Section	
Name		E-Mail	
Phone		Fax	

8.

☐ Add
☐ Remove
☐ Update
☐ Replace (Former Employee)

Title		Section	
Name		E-Mail	
Phone		Fax	

9. ☐ *Add*
☐ *Remove*
☐ *Update*
☐ *Replace (Former Employee)*

Title		*Section*	
Name		*E-Mail*	
Phone		*Fax*	

10. ☐ *Add*
☐ *Remove*
☐ *Update*
☐ *Replace (Prior Employee)*

Title		*Section*	
Name		*E-Mail*	
Phone		*Fax*	

This form may be submitted by:

E-mail – PropertyTax@sco.ca.gov

U.S. Postal Mail – State Controller's Office
Local Government Programs & Services Division
Attn: Property Tax Standards - KPL
P.O. Box 942850
Sacramento, CA 94250-5875