

INFORMATION REQUEST FORM

All requests must be in writing and sent to: Executive Director, 2000 San Francisco Avenue, Laredo, Texas
78040 Fax: (956) 722-6561 Email: publicinformation@larha.org

(Please type or print in ink)

Requestor's Name: Elizabeth Martinez Date: 02/19/14

Mailing Address, City, State, Zip: [REDACTED]

Telephone: [REDACTED] Fax: [REDACTED] Email: [REDACTED]

Description of Information Sought (please be specific): Personnel Policies regarding grounds for termination & separation pay.

Check one:

☒ I request paper copies to be given: ☐ In Person ☐ By Mail ☐ By Fax

☒ I request digital copies sent via email (when available)

☐ I request digital copies on diskette (when available)

☐ I request only to inspect (i.e. view) the information at Administration Building

☐ Other (please explain in detail) [REDACTED]

(For completion by LHA official only)

Date Received: 02/19/14 RFI I.D. # [REDACTED]

Disposition:

☐ Provided the following information for viewing: [REDACTED]

☒ Fees Assessed: \$ [REDACTED] Date: [REDACTED]

☒ Provided copies of the following information: via email

☐ Fees Assessed: \$ [REDACTED] Date: [REDACTED]

☐ Sent to Attorney on: [REDACTED]

☐ AG Opinion requested on: [REDACTED]

☐ AG Opinion # [REDACTED] received on: [REDACTED]

Notes: [REDACTED]

LHA Official Assigned: [Signature] Alma Natta (signature)

Current Folder: **INBOX**

Sign Out

[LHA MIS Dept.](#)

Compose



Addresses



Folders



Options



Search



Help



Calendar

[Message List](#) | [Unread](#) | [Delete](#)[Previous](#) | [Next](#)[Forward](#) | [Reply](#) | [Reply All](#)**Subject:** Employee Personnel Policy**From:** "LIZA SANTANA" <[REDACTED]>**Date:** Fri, February 19, 2016 2:50 pm**To:** "amata@larha.org" <amata@larha.org>**Cc:** "melissa@larha.org" <melissa@larha.org>**Priority:** Normal[View Full Header](#) | [View Printable Version](#) | [Download this as a file](#) | [View Message Details](#) | [Add to Addressbook](#)**Options:** [Block Sender](#)[Block Sender's Domain](#) | [View as plain text](#)

This is an official request to have access to the LHA employee personnel policy in regards of grounds for termination as well as earned annual and sick leave disbursement due to separation.

Elizabeth Martinez

**Attachments:**[untitled-\[1\]](#)

0.2 k

[text/plain]

[Download](#) | [View](#)

Current Folder: **Sent**

 Sign Out
[LHA MIS Dept.](#)
      
 Compose Addresses Folders Options Search Help Calendar

[Message List](#) | [Unread](#) | [Delete](#) | [Edit Message as New](#)
[Previous](#) | [Next](#)[Forward](#) | [Reply](#) | [Reply All](#)

Subject: Re: Employee Personnel Policy
From: "Alma D. Mata" <amata@larha.org>
Date: Thu, March 3, 2016 11:11 am
To: "LIZA SANTANA" <[REDACTED]>
Cc: "melissa@larha.org" <melissa@larha.org>

Priority: High**Mailer:** SquirrelMail/1.4.21**Read receipt:** requested
[View Full Header](#) | [View Printable Version](#) | [Download this as a file](#) | [View Message Details](#) | [Add to Addressbook](#)
Options: [Block Sender](#)
[Block Sender's Domain](#)

Elizabeth,

As per your request, find below the excerpt from the LHA Personnel Policies regarding termination and leave pay upon separation.

Housing Authority of the City of Laredo, Personnel Policies, Section 9:
 Employee Conduct and Discipline, C: Work Standards:

1. It shall be the duty of each employee to maintain a high standard of cooperation, efficiency, achievement, and economy in his/her work for the PHA. The supervisor shall be responsible for organizing and directing the work of their employees to achieve these objectives.

2. If work habits, behavior, performance and/or personal conduct of an employee fall below appropriate standards of courtesy, cooperation and professionalism, the immediate supervisor should point out the deficiencies at the time they are observed. Counseling and warning the employee in sufficient time for improvement should ordinarily precede formal disciplinary action. However, nothing in this section shall preclude immediate formal action, up to and including termination, as provided elsewhere in these policies and rules whenever the interest of the PHA requires such action or it is appropriate.

Housing Authority of the City of Laredo, Personnel Policies, Section 5:
 Termination of Employment, C: Termination Pay:

Except where the dismissal is for cause, an employee who resigns his/her employment in good standing (giving at least 2 weeks or 10 working days notice) shall be paid in a lump sum for any accumulated annual leave, less any debts owed to the PHA. An employee resigning or being terminated for employment with the PHA, other than for cause, shall receive all compensation due him/her in salary and unused accrued annual leave. (As per Section 7-D. Sick Leave, 3-F. Accrued unused sick leave hours are not compensated at separation of employment from the PHA.) Calculation of termination pay for annual leave and holiday(s) will be at the base rate of pay being received by the employee at the time of separation from the PHA.

Please acknowledge your receipt of this information by returning the attached Certificate of Receipt via email, fax, or in person.

Thank you,

Alma D. Mata
 Administration
 Laredo Housing Authority
 2000 San Francisco
 Laredo, TX 78040
 Voice (956) 722-4521, ext. 123
 Fax (956) 722-6561

** This email and any files transmitted with it are confidential and are intended solely for the use of the addressee. If you are not the intended recipient or the person responsible for delivering this email to the intended recipient, be advised that you have received this email in error and that any use, dissemination, forwarding, printing, or copying of the email is strictly prohibited. If you have received this email in error, please notify us at (956)722-4521.

Attachments:[Certificate of Receipt.pdf](#)

188 k

[application/binary]

[Download](#)

3/3/2016 11:13 AM



Housing Authority of the City of Laredo

2000 San Francisco Avenue

Telephone 956.722.4521

Fax 956.722.6561

CERTIFICATE OF HAND DELIVERY/RECEIPT

I do hereby certify that I have received documents requested from the Laredo Housing Authority:

Fee assessed:

Ø Cash

Ø Money Order

Elizabeth Martinez

Requestor-Print Name

Alma D. Mata

LHA Representative -Print Name

Signature

Date

Time

[Signature]

3/3/14

10:25 am

Signature

Date

Time

2-19-2016

I am Requesting a copy or access
of employee policy regarding employee
earn leave due to separation.

Just
