Office of the New York State Comptroller New York State and Local Retirement System 110 State Street, Albany, New York 12244-0001

Please type or print clearly in blue or black ink

## **Received Date**

## Standard Work Day and Reporting Resolution for Elected and Appointed Officials

RS 2417-A

Employer Location Code  1 1 1 1 1		SEE INSTRUCTIONS FOR COMPLETING FORM ON REVERSE SIDE						RS 2417-A (Rev.09/18)
BE IT RESOLVED, that theTo		Town of Willabee	Town of Willabee		11111 hereby established the following standard work days f			these titles and will
(Name of Employer) (Location Code) report the officials to the New York State and Local Retirement based on their record of activities:								
Title:	Standard Work Day: (Hrs/day) Min. 6 hrs Max. 8 hrs	Name: (First and Last)	Social Security Number: (Last 4 digits)	NYSLRS ID:	Tier 1 (Check only if member is Tier 1)	Current Term Begin & End Dates: (mm/dd/yy- mm/dd/yy)	Record of Activities Result:*	Not Submitted: (Check only if official did not submit their Record of Activities)
Elected Officials:								
Highway Superintendent	8.00	John Smith	0000	R11111111		1/1/2010 - 12/ <u>3</u> 1/2013	32.79	
Receiver of Taxes	6.00	Michelle Jones	1111	R2222222	X	1/1/2010 - 12/31/2014	NA	
Town Justice	6.25	Michael Hall	2222	R33333333		1/1/2010 - 12/31/2011		X
Appointed Officials:								
Planning Board Member	7.00	Joseph Gray	3333	R4444444		1/1/2010 - 12/31/2010	17.54	
I,, secretary/clerk of the governing board (Circle one)					(Name of Employer)			
do hereby certify that I have compared the foregoing with the original resolution passed by such board at a legally convened meeting held on the day of, 20								
on file as part of the minutes of such meeting, and that same is a true copy thereof and the whole of such original.  IN WITNESS WHEREOF, I have hereunto set my hand and the seal of the on this on this day of, 20, (Name of Employer)								
IN WITNESS WHEREOF	to set my hand and the se	(Name of Employe	er)	011 tills	_ uay oi	, 20,		
	of Secretary or Clerk)		<b>_·</b>					
Affidavit of Posting: I, being duly sworn, deposes and says that the posting of the Resolution began on (Name of Secretary or Clerk)								
(Date)		I for at least 30 days. Tha	t the Resolution	was available to the publ	ic on the:			
	e at:							
Official sign board at:								(seal)
Main entrance Secretary or Clerk's office at:					Page	_ of (for	additional rows, atta	ach a RS 2417-B form.