

Received Date

Standard Work Day and Reporting Resolution for Elected and Appointed Officials

Employer Location Code

SEE INSTRUCTIONS FOR COMPLETING FORM ON REVERSE SIDE

RS 2417-A

(Rev.11/19)

BE IT RESOLVED, that the TOWN OF THURMAN / 30821 hereby established the following standard work days for these titles and will report the officials to the New York State and Local Retirement based on their record of activities:

Name	Social Security Number	NYSLRS ID	Title	Current Term Begin & End Dates	Standard Work Day	Record of Activities Result	Not Submitted	Pay Frequency	Tier 1
Elected Officials:									
<u>Debra Runyon</u>			<u>Town Supervisor</u>	<u>1-1-22</u> <u>12-31-23</u>	<u>6</u>	<u>21.7</u>	<input type="checkbox"/>		<input type="checkbox"/>
Appointed Officials:									
							<input type="checkbox"/>		<input type="checkbox"/>
							<input type="checkbox"/>		<input type="checkbox"/>
							<input type="checkbox"/>		<input type="checkbox"/>

I, _____, secretary/clerk of the governing board of the _____, of the State of New York, 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 _____ day of _____, 20____.

(Signature of Secretary or Clerk)

(Name of Secretary or Clerk)

(Name of Employer)

(Name of Employer)

Affidavit of Posting: I, _____ being duly sworn, deposes and says that the posting of the Resolution began on _____ and continued for at least 30 days. That the Resolution was available to the public on the: _____

- Employer's website at: _____
- Official sign board at: _____
- Main entrance Secretary or Clerk's office at: _____

(seal)