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

Standard Work Day and Reporting Resolution for Elected and Appointed Officials

RESOLUTION #39 of 2015
Offered by: Mary Zovistoski
Seconded by: Christopher D. Matthews
Taylor-aye; Peterson-aye; Cantwell III-aye; Matthews-aye; Zovistoski-aye.

RS 2417-A
(Rev. 3/14)

BE IT RESOLVED, that the Town Board/Town of Clayton (Name of Employer) / 30491 (Location Code) hereby establishes the following standard work days for these titles and will report the officials to the New York State and Local Retirement System based on time keeping system records or 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)	Registration Number	Tier 1 (Check only if member is in Tier 1)	Current Term Begin & End Dates (mm/dd/yy-mm/dd/yy)	Participates in Employer's Time Keeping System (Yes/No-If Yes, do not complete the last two columns)	Record of Activities Result*	Not Submitted (Check only if official did not submit their Record of Activities)
Elected Officials									
TwnClerk/TaxColl.	8	Kathleen LaClair			☐	01/01/12-12/31/15	N	24.60	☐
Town Board Member	6	Mary Zovistoski			☐	01/01/14-12/31/17	N	9.77	☐
Town Justice	6	William Ramseier			☐	01/01/14-12/31/17	N	1.02	☐
Appointed Officials									
Highway Superintendent	8	William Sherman			☐	10/31/14-12/31/15	Y		☐
Assessor	8	Denise Trudell			☐	10/01/03-01/16/15	Y		☐
Zoning/Code Enforce	8	Richard Ingerson			☐	01/01/15-12/31/15	Y		☐

SEE INSTRUCTIONS FOR COMPLETING FORM ON REVERSE SIDE

I, Kathleen E. LaClair (Name of secretary or clerk), secretary/clerk (Circle one) of the governing board of the Town of Clayton (Name of Employer), 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 27th day of May, 20 15 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 Town of Clayton (Name of Employer) on this 28th day of May, 20 15, Kathleen E. LaClair (Signature of the secretary or clerk).

Affidavit of Posting: I, _____ (Name of secretary or clerk), being duly sworn, deposes and says that the posting of the Resolution began on _____ (Date) 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)

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Standard Work Day and Reporting Resolution for Elected and Appointed Officials Continuation Form

RS 2417-B

(Rev. 3/14)

Title	Standard Work Day (Hrs/day) Min. 6 hrs, Max. 8 hrs	Name (First & Last)	Social Security Number (Last 4 digits)	Registration Number	Tier 1 (Check only if member is in Tier 1)	Current Term Begin & End Dates (mm/dd/yy-mm/dd/yy)	Participates in Employer's Time Keeping System (Yes/No-If Yes, do not complete the last two columns)	Record of Activities Result*	Not Submitted (Check only if official did not submit their Record of Activities)
Elected Officials									
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Appointed Officials									
Deputy Town Clerk	8	Janet Sullins			☐	01/01/15-12/31/15	Y		☐
Exec.Asst to Suprv	8	Terra Bach			☐	01/01/15- 05/22/15	Y		☐
Clerk to Suprv.	6	Alicia Dewey			☐	01/01/15-12/31/15	Y		☐
Asst ZEO/Clk toAssessor	8	Kimberli Johnston			☐	01/01/15-12/31/15	Y		☐
Justice Clerk	6	Jamie Sanchez			☐	01/01/15-12/31/15	Y		☐
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Employer Town of Clayton Location Code 30491 Page 2 of 2 (use with form RS 2417-A)