



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 #48 OF 2016  
 Offered by: Christopher D. Matthews  
 Seconded by: Robert W. Cantwell III

RS 2417-A  
 (Rev. 3/14)

Storandt-aye; Cantwell III-aye; Matthews-aye; Zovistoski-aye; Patchen-aye.

BE IT RESOLVED, that the Town Board/Town of Clayton / 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)
<b>Elected Officials</b>									
TClerk/Tax Coll	8	Kathleen LaClair			<input type="checkbox"/>	01/01/16-12/31/19	N	24.74	<input type="checkbox"/>
T Supervisor	8	David Storandt			<input type="checkbox"/>	01/01/16-12/31/19	N	23.0	<input type="checkbox"/>
T Hwy. Supert.	8	William Sherman			<input type="checkbox"/>	01/01/16-12/31/19	N	26.95	<input type="checkbox"/>
<b>Appointed Officials</b>									
Assessor	8	Timothy Ritter			<input type="checkbox"/>	05/26/15-9/30/19	Y		<input type="checkbox"/>
Asst ZEO/AssntClerk	8	Kimberli Johnston			<input type="checkbox"/>	1/1/16-12/31/16	Y		<input type="checkbox"/>
Clerk to Supervisor	8	Alicia Dawey			<input type="checkbox"/>	1/1/16-12/31/16	Y		<input type="checkbox"/>

### SEE INSTRUCTIONS FOR COMPLETING FORM ON REVERSE SIDE

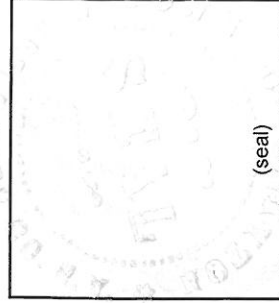
I, Kathleen E. LaClair (Name of secretary or clerk), secretary/clerk of the governing board of the Town of Clayton (Name of Employer), of the State of New York,

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 8th day of

June, 2016 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 9th day of June, 2016.

*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 \_\_\_\_\_

