

Please type or print clearly  
 in blue or black ink

Employer Location Code  
 2 0 0 0 5

SEE INSTRUCTIONS FOR COMPLETING FORM ON REVERSE SIDE

RS 2417-A

(Rev.09/18)

Received Date

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

BE IT RESOLVED, that the \_\_\_\_\_ City of Beacon \_\_\_\_\_ 2005 \_\_\_\_\_ hereby established the following standard work days for 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)	NYS SLRS ID:	Tier 1 (Check only if member if 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)
<b>Elected Officials:</b>								
Council Member	7	*Not in ERS *			<input type="checkbox"/>	N/A		<input type="checkbox"/>
Council Member	7	* Not in ERS *			<input type="checkbox"/>	N/A		<input type="checkbox"/>
Council Member	7	* Not in ERS *			<input type="checkbox"/>	N/A		<input type="checkbox"/>
<b>Appointed Officials:</b>								
					<input type="checkbox"/>			<input type="checkbox"/>
					<input type="checkbox"/>			<input type="checkbox"/>
					<input type="checkbox"/>			<input type="checkbox"/>

I, lola C. Taylor secretary/clerk of the governing board of the \_\_\_\_\_ City of Beacon \_\_\_\_\_ of the State of New York,  
 (Name of Secretary or Clerk) (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 \_\_\_\_\_ City of Beacon \_\_\_\_\_ on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ 19\_\_\_\_,  
 (Name of Employer)

**Affidavit of Posting:** I, lola C. Taylor (Signature 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 \_\_\_\_\_  
 (Name of Secretary or Clerk)

Employer's website at: www.cityofbeacon.org

Official sign board at: \_\_\_\_\_

Main entrance Secretary or Clerk's office at: \_\_\_\_\_

(seal)

