

Standard Work Day and Reporting Resolution for Elected and Appointed Officials

Received Date

SEE INSTRUCTIONS FOR COMPLETING FORM ON REVERSE SIDE

RS 2417-A (Rev. 11/19)

Employer Location Code
301167

BE IT RESOLVED, that the TOWN OF MENDON / 301167 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	NYS LRS ID	Title	Current Term Begin & End Dates	Standard Work Day	Record of Activities Result	Not Submitted	Pay Frequency	Tier 1
Elected Officials:									
Thomas Duggals	6589	R12831026	Town Board	11/20-12/31/25	7	2.48	<input type="checkbox"/>	Bi-week	<input type="checkbox"/>
Appointed Officials:									
Dustin Cichon	0061	R12986051	Zoning Board	11/21-12/31/25	7	2.29	<input type="checkbox"/>	Quarterly	<input type="checkbox"/>
							<input type="checkbox"/>		<input type="checkbox"/>
							<input type="checkbox"/>		<input type="checkbox"/>

I, Michelle Booth secretary/clerk of the governing board of the Town of Mendon, 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 11th day of April, 2022 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 Mendon on this 11th day of April, 2022, (Name of Employer)

Michelle Booth
 (Signature of Secretary or Clerk)

Affidavit of Posting: I, Michelle Booth being duly sworn, deposes and says that the posting of the Resolution began on (Name of Secretary or Clerk)

04/11/2022 and continued for at least 30 days. That the Resolution was available to the public on the: (Date)

Employer's website at: TownofMendon.org

Official sign board at: 16 W. Main St. Hopewake Falls, NY 14472

Main entrance Secretary or Clerk's office at: _____ Page _____ of _____ (for additional rows, attach a RS 2417-B form.)

(seal)

