



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

**RS 2417-A**

(Rev. 3/14)

BE IT RESOLVED, that the TOWN OF NORTH EAST / 30465 hereby establishes the following standard work days for these titles and  
 (Name of Employer) (Location Code)

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>									
Town Clerk	6	Lisa M. Cope	7789	42284372	<input type="checkbox"/>	01/01/14-12/31/15	No	23.84	<input type="checkbox"/>
Town Justice	6	Casey S. McCabe	6392	50052232	<input type="checkbox"/>	01/01/14-12/31/17	No	1.14	<input type="checkbox"/>
Town Board Member	6	Steven T. Merwin	8758	41215559	<input type="checkbox"/>	01/01/14-12/31/17	No	2.57	<input type="checkbox"/>
<b>Appointed Officials</b>									
Highway Superintendent	8	Robert D. Stevens	8213	32550600	<input type="checkbox"/>	01/01/14-12/31/15	No	32.10	<input type="checkbox"/>
Building Inspector	6	Kenneth W. McLaughlin	4413	35974591	<input type="checkbox"/>	01/01/15-12/31/15	No	2.53	<input type="checkbox"/>
Deputy Building Inspector	6	Michael C. Segelken	5833	39563150	<input type="checkbox"/>	01/01/15-12/31/15	No	3.86	<input type="checkbox"/>

**SEE INSTRUCTIONS FOR COMPLETING FORM ON REVERSE SIDE**

I, Lisa M. Cope, secretary/clerk of the governing board of the TOWN OF NORTH EAST, 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 12<sup>th</sup> day of February, 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 NORTH EAST on this 13<sup>th</sup> day  
 of February, 20 15, Lisa Cope  
 (Signature of the secretary or clerk) (Name of Employer)

**Affidavit of Posting:** I, Lisa M. Cope, being duly sworn, deposes and says that the posting of the  
 (Name of secretary or clerk)

Resolution began on 2/13/15 and continued for at least 30 days. That the Resolution was available to the public on the  
 (Date)

Employer's website at www.townofnortheastny.gov

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

Main entrance secretary or clerk's office at 19 No. Maple Ave., Millerton, NY



