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

Please type or print clearly in blue or black ink

Employer Location Code

1				
5	0	7	0	4

Received Date	

Standard Work Day and Reporting Resolution for Elected and Appointed Officials

RS 2417-A

5 0 7 0 4		SEE	INSTRUCTIONS FOR COM	PLETING FORM ON	KEVERSE SIDE				(Rev.11/19)
BE IT RESOLVED, that the or		(Name of Emp	oloyer)	(Location Code)	by established the	e following star	ndard work days	for these titles	and will
Name	Social Security Number	NYSLRS ID	Title	Current Term Begin & End Dates	Standard Work Day	Record of Activities Result	Not Submitted	Pay Frequency	Tier 1
Elected Officials:									146
Michael F. Rich III			Commissioner	1/1/20-12/31/22	6	2.87			
Appointed Officials:					TVESTED				Walk I
Robyn M. Hale (Name of Secretor) do hereby certify that I have come file as part of the minutes of the MITNESS WHEREOF, I had	ompared the	foregoing with the	is a true copy thereof and the	by such board at a lega te whole of such origin	(Name of E ally convened mee nal.	eting held on th			20_21
(Signature of Secretary Affidavit of Posting: I, Robyn and (Date) Employer's website at: Official sign board at:	M. Hale (Nan d continued fo	•	rk) s. That the Resolution was a	vorn, deposes and say		of the Resolu	tion began on	(sea	ıl)