



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. 8/15)

BE IT RESOLVED, that the TOWN OF CHESTER / 30466 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 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)	Record of Activities Result*	Not Submitted (Check only if official did not submit their Record of Activities)
Elected Officials								
SUPERVISOR	6	ALEXANDER JAMIESON			<input type="checkbox"/>	1/1/16-12/31/19	22.04	<input type="checkbox"/>
COUNCILPERSON	6	CYNTHIA SMITH			<input type="checkbox"/>	1/1/16-12/31/19	14.44	<input type="checkbox"/>
TOWN CLERK	6	LINDA ZAPPALA			<input type="checkbox"/>	1/1/16-12/31/17	26.33	<input type="checkbox"/>
Appointed Officials								
PLANNING BOARD	6	BARRY SLOAN			<input type="checkbox"/>	12/1/13-12/31/19	.67	<input type="checkbox"/>
HISTORIAN	6	CLIFTON PATRIC			<input type="checkbox"/>	1/1/17-12/31/17	5.72	<input type="checkbox"/>
ZONING BOARD	6	WALTER POPALLO			<input type="checkbox"/>	1/9/17-12/31/21	.17	<input type="checkbox"/>

SEE INSTRUCTIONS FOR COMPLETING FORM ON REVERSE SIDE

I, LINDA A. ZAPPALA, Secretary/Clerk of the governing board of the TOWN OF CHESTER, 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 28TH day of JUNE, 20 17 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 CHESTER on this 29 day of JUNE, 20 17, Linda A. Zappala (Signature of the secretary or clerk)

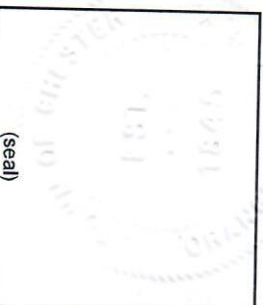
Affidavit of Posting: I, LINDA A. ZAPPALA, (Name of secretary or clerk) being duly sworn, deposes and says that the posting of the

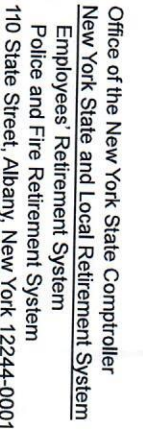
Resolution began on 6/29/17 (Date) and continued for at least 30 days. That the Resolution was available to the public on the

☒ Employer's website at CHESTER-NY.GOV

☒ Official sign board at TOWN CLERKS OFFICE - CHESTER TOWN HALL, 1786 KINGS HIGHWAY

☐ Main entrance secretary or clerk's office at _____





RS 2417-A

(Rev. 8/15)

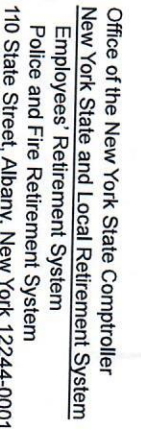
Title	Standard Work Day (Hrs/day) Min. 6 hrs Max. 8 hrs	Name (First and Last)	Social Security Number (Last 4 digits)	Registration Number	Tier 1 (Check only if member is in Tier 1)	Current Term Begin & End Dates (mm/dd/yy-mm/dd/yy)	Record of Activities Result*	Not Submitted (Check only if official did not submit their Record of Activities)
Elected Officials								
COUNCILPERSON	6	ROBERT VALENTINE			<input type="checkbox"/>	1/1/14-12/31/17	10.42	<input type="checkbox"/>
HIGHWAY SUPT	6	ANTHONY LASPINA			<input type="checkbox"/>	1/1/16-12/31/19	37.5	<input type="checkbox"/>
TOWN JUSTICE	6	SHARON WORTHY-SPIEGEL			<input type="checkbox"/>	1/1/14-12/31/17	7	<input type="checkbox"/>
Appointed Officials								
					<input type="checkbox"/>			<input type="checkbox"/>
					<input type="checkbox"/>			<input type="checkbox"/>
					<input type="checkbox"/>			<input type="checkbox"/>
					<input type="checkbox"/>			<input type="checkbox"/>
					<input type="checkbox"/>			<input type="checkbox"/>

SEE INSTRUCTIONS FOR COMPLETING FORM ON REVERSE SIDE

IN WITNESS WHEREOF, I have hereunto set my hand and the seal of the _____
of _____, 20____, _____ on this _____ day
(Signature of the secretary or clerk) (Name of Employer)

Page 1 of 2 (for additional rows, attach a RS2417-B form).

(seal)



RS 2417-A

(Name of Employer) _____ (Location Code) _____

will report the officials to the New York State and Local Retirement System 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)	Registration Number	Tier 1 (Check only if member is in Tier 1)	Current Term Begin & End Dates (mm/dd/yyyy-mm/dd/yyyy)	Record of Activities Result*	Not Submitted (Check only if official did not submit their Record of Activities)
Elected Officials								
TOWN JUSTICE	6	JANET HAISLIP			<input type="checkbox"/>	1/1/17-12/31/20	4	<input type="checkbox"/>
TAX RECEIVER	6	VINCENT MANISCALCO			<input type="checkbox"/>	1/1/14-12/31/17	20.31	<input type="checkbox"/>
Appointed Officials								
					<input type="checkbox"/>			<input type="checkbox"/>
					<input type="checkbox"/>			<input type="checkbox"/>
					<input type="checkbox"/>			<input type="checkbox"/>
					<input type="checkbox"/>			<input type="checkbox"/>
					<input type="checkbox"/>			<input type="checkbox"/>
					<input type="checkbox"/>			<input type="checkbox"/>

SEE INSTRUCTIONS FOR COMPLETING FORM ON REVERSE SIDE

I, LINDA A. ZAPPALA, secretary/clerk of the governing board of the TOWN OF CHESTER, 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 28TH day of
JUNE, 20 17 on file as part of the minutes of such meeting, and that same is a true copy thereof and the whole of such original.

Affidavit of Posting: I, LINDA A. ZAPPALA
(Name of secretary or clerk), being duly sworn, deposes and says that the posting of the

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

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☒ Official sign board at TOWN CLERK'S OFFICE - CHESTER TOWN HALL, 1786 KINGS HIGHWAY

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Page 1 of 2 (for additional rows, attach a RS2417-B form).