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

Received Date

Elected and Appointed Officials Standard Work Day and Reporting Resolution for

Please type or print clearly in blue or black ink

SEE INSTRUCTIONS FOR COMPLETING FORM ON REVERSE SIDE

Employer Location Code 4 0 3 8 9		SEE	SEE INSTRUCTIONS FOR COMPLETING FORM ON REVERSE SIDE	PLETING FORM ON	REVERSE SIDE			RS 2	RS 2417-A (Rev.12/23)
BE IT RESOLVED, that the Village of Scottsville	illage of Scottsville	i	/ 40389		hereby established the following standard work days for these titles and will	following star	idard work days	for these titles	and will
(Name of Employer) (Location report the officials to the New York State and Local Retirement based on their record of activities:	York State an	(Name of Employer) Id Local Retirement ba	hover)	n Code)	•	•	•		
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:									
Wayne LaVair			Deputy Mayor	4/1/22-4/7/2026	6	.52		quarterl	
Appointed Officials:									
_{I,} Anne Hartman			secretary/clerk of the governing board of the	ing board of the VIII	Village of Scot	Scottsville	of the	of the State of New York,	X
(Name of Secretary or Clerk) do hereby certify that I have compared the foregoing with the original resolution passed by such board at a legally co	ompared the	foregoing with the	(Circle one) original resolution passed b	y such board at a leg:	(Name of Employer) ally convened meeting he	(Name of Employer) onvened meeting held on the 14th		day of October, 20 25	20 25
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 Village of Scottsville	of such meetin ave hereunto s	ig, and that same set my hand and	is a true copy thereof and the seal of the Village of Sc	e whole of such origir ottsville		on this 15th	day of October	oer _{, 20} 25	["
Come Clark or Clark	Crefary or Clerk		ļ	(Name of Employer)					
Affidavit of Posting: I, Anne I	Anne Hartman (Nar	(Name of Secretary or Clerk)		being duly sworn, deposes and says that the posting of the Resolution began on	/s that the posting	of the Resolut	ion began on		
10/15/2025 and (Date) Employer's website at:	scottsvilleny.org	r at least 30 days	and continued for at least 30 days. That the Resolution was available to the public on the: at: SCOttsvilleny.org	vailable to the public o	on the:			-	
Official sign board at:			20					(seal)	
Main entrance Secretary or Clerk's office at:	y or Clerk's of	-	22 Main St, Scottsville, NY 14546	4546 Page	ge of _	(for	_(for additional rows, attach a RS 2417-B form.	attach a RS 24	17-B form.