



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

IDA Resolution No. IDA-18-06-19

**RS 2417-A**

(Rev. 3/14)

BE IT RESOLVED, that the St. Lawrence County Industrial Development Agency/ 51467 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>									
<b>Appointed Officials</b>									
Chief Executive Officer	7	Patrick Kelly				07/01/18-06/30/19	yes		
Admin. Services Coordinator	7	Lori Sibley				07/01/18-06/30/19	yes		

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

I, Lori Sibley, ~~XXXXXXXX~~ secretary/clerk of the governing board of the St. Lawrence County Industrial Development Agency, 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 22nd day of June, 2018 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 St. Lawrence County Industrial Development Agency on this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.  
 (Name of Employer)  
 (Signature of the secretary or clerk)

**Affidavit of Posting:** I, Lori Sibley, being duly sworn, deposes and says that the posting of the  
 (Name of secretary or clerk)

Resolution began on 06/22/18 and continued for at least 30 days. That the Resolution was available to the public on the  
 (Date)

Employer's website at www.SLCIDA.com

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

Main entrance secretary or clerk's office at 19 Commerce Lane, Suite 1, Canton NY 13617

