

Please type or print clearly
in blue or black ink

Employer Location Code

3 0 0 8 2

Received Date

Standard Work Day and Reporting Resolution for Elected and Appointed Officials

SEE INSTRUCTIONS FOR COMPLETING FORM ON REVERSE SIDE

RS 2417-A

(Rev.12/23)

BE IT RESOLVED, that the TOWN OF MANLIUS / 30082 hereby established the following standard work days for these titles and will

(Name of Employer)

(Location Code)

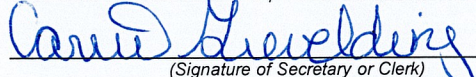
report the officials to the New York State and Local Retirement based on their record of activities:

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:									
ROBERT CUSHING			HIGHWAY SUPT	1/1/26-12/31/28	8	28.57	☐	BIWEEKLY	☐
CARRIE GREVELDING			TOWN CLERK	1/1/26-12/31/28	7.25	23.37	☐	BIWEEKLY	☐
LAURA PESCHEL			RECEIVER OF TAXES	1/1/26-12/31/28	7.25	28.05	☐	BIWEEKLY	☐
Appointed Officials:									
							☐		☐
							☐		☐
							☐		☐

I, CARRIE GREVELDING, secretary/clerk of the governing board of the TOWN OF MANLIUS, of the State of New York,
(Name of Secretary or Clerk) (Circle one) (Name of Employer)

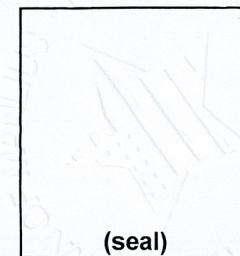
do hereby certify that I have compared the foregoing with the original resolution passed by such board at a legally convened meeting held on the 26th day of AUGUST, 2026
on file as part of the minutes of such meeting, and that same is a true copy thereof and the whole of such original.

IN WITNESS WHEREOF, I have hereunto set my hand and the seal of the TOWN OF MANLIUS on this 27th day of AUGUST, 2026,
(Name of Employer)


(Signature of Secretary or Clerk)

Affidavit of Posting: I, CARRIE GREVELDING being duly sworn, deposes and says that the posting of the Resolution began on
(Name of Secretary or Clerk)
8/27/26 and continued for at least 30 days. That the Resolution was available to the public on the:
(Date)

- ☒ Employer's website at: WWW.TOWNOFMANLIUS.GOV
- ☐ Official sign board at: _____
- ☐ Main entrance Secretary or Clerk's office at: _____



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(Name of Employer)

(Location Code)

report the officials to the New York State and Local Retirement based on their record of activities:

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:									
SARA BOLLINGER			TOWN SUPERVISOR	1/1/26-12/31/26	7.25	20.42	☐	BIWEEKLY	☐
WILLIAM NICHOLSON			TOWN COUNCILOR	1/1/26-12/31/28	7.25	3.49	☐	BIWEEKLY	☐
DAVID ROTHSCHILD			TOWN JUSTICE	1/1/26-12/31/29	7.25	4.80	☐	BIWEEKLY	☐
Appointed Officials:									
							☐		☐
							☐		☐
							☐		☐

I, CARRIE GREVELDING, secretary/clerk of the governing board of the TOWN OF MANLIUS, 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 26th day of AUGUST, 2026

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 MANLIUS on this 27th day of AUGUST, 2026,
(Name of Employer)

Carrie Grevelding
(Signature of Secretary or Clerk)

Affidavit of Posting: I, CARRIE GREVELDING being duly sworn, deposes and says that the posting of the Resolution began on 8/27/26 and continued for at least 30 days. That the Resolution was available to the public on the:
(Date)

☒ Employer's website at: WWW.TOWNOFMANLIUS.GOV

☐ Official sign board at: _____

☐ Main entrance Secretary or Clerk's office at: _____

(seal)