



ERIE COUNTY WATER AUTHORITY INTEROFFICE MEMORANDUM

TO: Jerome D. Schad, Chair
Peggy A. LaGree, Vice Chair
Michele M. Iannello, Treasurer

FROM: Jessica R. Brown, Comptroller *JRB*

DATE: June 10, 2024

SUBJECT: New York State and Local Retirement System Recertification of the Record of Activities for Commissioners Schad and Iannello

The New York State and Local Retirement System (NYSLRS) requires all appointed officials beginning a new term to complete a three-month record of activities and to establish a standard workday to be used in our monthly reporting. In August 2021, the Board adopted a standard workday for Commissioners of 6 hours and accepted the record of activities results for Commissioner Schad and Commissioner Iannello.

If it still represents the official's responsibilities and hours, the record of activities is valid for up to eight years. The official entering a new term instead submits a recertification of the record of activities to the Board, which is kept on file and only sent to NYSRLS upon request.

I drafted a resolution for Board consideration which accepts the recertification of Commissioner Schad and Commissioner Iannello's record of activities.

Please let me know if you have any questions or require additional information.

cc J. Tomaka

ERIE COUNTY WATER AUTHORITY
AUTHORIZATION FORM
For Approval/Execution of Documents
(check which apply)

Contract: _____ **Project No.:** _____
Project Description: Recertification of the Record of Activities for Appointed Officials

Item Description:

- | | | | |
|--|--|---|---------------------------------------|
| <input type="checkbox"/> Agreement | <input type="checkbox"/> Professional Service Contract | <input type="checkbox"/> Amendment | <input type="checkbox"/> Change Order |
| <input type="checkbox"/> BCD | <input type="checkbox"/> NYSDOT Agreement | <input type="checkbox"/> Contract Documents | <input type="checkbox"/> Addendum |
| <input type="checkbox"/> Recommendation for Award of Contract | <input type="checkbox"/> Recommendation to Reject Bids | | |
| <input type="checkbox"/> Request for Proposals | | | |
| <input checked="" type="checkbox"/> Other <u>Recertification of the Record of Activities</u> | | | |

Action Requested:

- | | |
|---|--|
| <input type="checkbox"/> Board Authorization to Execute | <input type="checkbox"/> Legal Approval |
| <input type="checkbox"/> Board Authorization to Award | <input type="checkbox"/> Execution by the Chairman |
| <input type="checkbox"/> Board Authorization to Advertise for Bids | <input type="checkbox"/> Execution by the Secretary to the Authority |
| <input type="checkbox"/> Board Authorization to Solicit Request for Proposals | |
| <input checked="" type="checkbox"/> Other <u>Accept Recertification of Commissioners Schad and Iannello</u> | |

Approvals Needed:

APPROVED AS TO CONTENT:

- | | | |
|---|-------------------------------|-------------------------|
| <input checked="" type="checkbox"/> Comptroller | <u><i>Jessica R Brown</i></u> | Date: <u>5/31/2024</u> |
| <input type="checkbox"/> Chief Operating Officer | _____ | Date: _____ |
| <input type="checkbox"/> Executive Engineer | _____ | Date: _____ |
| <input type="checkbox"/> Director of Administration | _____ | Date: _____ |
| <input type="checkbox"/> Risk Manager | _____ | Date: _____ |
| <input checked="" type="checkbox"/> Chief Financial Officer | <u><i>Oppe Imine</i></u> | Date: <u>06/06/2024</u> |
| <input type="checkbox"/> Legal | _____ | Date: _____ |

APPROVED FOR BOARD RESOLUTION:

- | | | |
|--|-------------------|------------------------|
| <input checked="" type="checkbox"/> Secretary to the Authority | <u><i>TED</i></u> | Date: <u>6/10/2024</u> |
|--|-------------------|------------------------|

Remarks: _____

Resolution Date: _____ **Item No:** _____

Please type or print clearly
in blue or black ink

Received Date

Recertification of the Record of Activities

RS 2419

(Rev. 06/22)

NYSLRS ID

Social Security Number (last 4 digits)

Retirement System [check one]

Employees' Retirement System (ERS)

Police and Fire' Retirement System (PFRS)

I, Jerome D. Schad, certify that I completed a 3-month record of activities for the term that began 4/28/2019 for my position as ECWA Board Member. I attest that the record of activities maintained for the above named term is still representative of my hours worked and that my responsibilities have not substantially or materially changed. My current term begins on 4/28/2022 and ends on 4/27/2025.



Signature of Member

11 June 2024

Date

Employer Location Code: 50629

NOTE: A record of activities and any certification based upon such record shall not be valid for more than eight years from the date of the taking of office for which the record of activities was initially maintained.

Please keep this form on file in your records and submit a copy to NYSLRS only upon request.

Received Date

Recertification of the Record of Activities

RS 2419
(Rev. 06/22)

Please type or print clearly
in blue or black ink

NYSLRS ID

Social Security Number (last 4 digits)

Retirement System [check one]

Employees' Retirement System (ERS)

Police and Fire' Retirement System (PFRS)

I, Michele M. Iannello, certify that I completed a 3-month record of activities for the term that began 4/28/2021 for my position as ECWA Board Member. I attest that the record of activities maintained for the above named term is still representative of my hours worked and that my responsibilities have not substantially or materially changed. My current term begins on 4/26/2024 and ends on 4/25/2027.

Michele M. Iannello
Signature of Member

5/11/24
Date

Employer Location Code: 50629

NOTE: A record of activities and any certification based upon such record shall not be valid for more than eight years from the date of the taking of office for which the record of activities was initially maintained.

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