

Recertification of the Record of Activities

RS 2419

(Rev. 9/12)

I,MICHAEL KALNICK		, certify that I completed a 3-month record of	
activities for the term that began	1/1/17	for my position as	CHAIRPERSON
I attest that the record of activities n	naintained for the	e above named term is sti	Il representative of my hours
worked and that my responsibilities have not substantially or materially changed. My current term begins on			
1/1/22	and ends on	12/31/25	
Signature of Member NYSLRS Registration Number: 38639886			
Employer Location Code: 51232			

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.