



Office of the New York State Comptroller
Thomas P. DiNapoli
 New York State and Local Retirement System
 Employees' Retirement System
 Police and Fire Retirement System
 110 State St, Albany, NY 12244-0001

**Designation of Alternate CFO for the
 Certification of Individuals Engaged In Certain Professions (RS2414)
 and/or**

Certification for Determining Independent Contractor or Employee Status (RS2415)

Location Code: _____

I, _____, CEO CFO (select one)
 (print name)

of _____, authorize the following individual:
 (employer name)

(Print Name of Alternate CFO)	(Title)
(Address Line 1)	(Address Line 2)
(City, Zip Code)	(Telephone Number)
(Email)	(Fax Number)

to act as an alternate CFO to certify the Certification for Individuals Engaged in Certain Professions (RS2414) and/or the Certification for Determining Independent Contractor or Employee Status (RS2415) forms.

All correspondence regarding this matter should be addressed to this individual.

(CEO/CFO Signature)	(Date)
(Title)	(Telephone Number)