

OMITTED SERVICE CREDIT AUTHORIZATION

(See instructions on reverse side)

Member Name <b>John A. SILVER</b>	[REDACTED]
Member Address <b>901 East Michigan Avenue, Urbana, IL 61801</b>	Present Position <b>Tool Room Clerk</b>
Employer Name <b>CITY OF URBANA</b>	Employer Number (State SSA Number) <b>69-033 3 3 9 4</b>

**Certification by Authorized Agent**

I certify that earnings for the above named member shown in the following statement are in agreement with the governmental unit's payroll records.

Year	Earnings	Months of Creditable Service		Year	Earnings	Months of Creditable Service	
		With Earnings	Without Earnings*			With Earnings	Without Earnings*
1977	699.00	5					
1978	3,838.88	12					
1979	4,388.00	12					
1980	4,632.00	12					
1981	4,090.70	11					
					<b>TOTAL</b>		

\* SE - (seasonal leave explained on reverse side)

3/22/82  
Date

*[Signature]*  
Signature of Authorized Agent

**Resolution by Governing Body**

WHEREAS, earnings for the above named member should have been but were not reported to the Illinois Municipal Retirement Fund for participation for 4 years and 4 months;

RESOLVED, that it is the finding of this URBANA CITY COUNCIL that:  
Name of Governing Body

1. The member was employed in a position normally requiring the performance of duty during 600 hours or more per year, during the years and months shown above;
2. None of the service of the member during these years and months was in a probationary position of four months or less;
3. The member is currently employed in a participating position; and

FURTHER RESOLVED, that the governing body agrees to accept the obligation due IMRF for employer contributions with interest thereon payable through future employer contributions and to accept the charges for employer and employee social security taxes if such taxes have not been paid on the omitted service earnings.

FURTHER RESOLVED, that the authorized agent is hereby authorized and directed to file a certified copy of this resolution and all other pertinent forms and documents with the Illinois Municipal Retirement Fund.

**Certification by Clerk or Secretary of Governing Body**

I, Ruth S. Brookens, the City Clerk of CITY OF URBANA  
Name  
the City of Urbana  
Name of Governmental Unit  
do hereby certify that I am the  
Clerk or Secretary

keeper of its records and that the foregoing is a true and correct copy of a resolution duly adopted by its governing body at a meeting held on the 15th day of March, 19 82.

March 22, 1982  
Date

Clerk  
Clerk or Secretary

*[Signature]*  
Signature

