



ERIE COUNTY WATER AUTHORITY
INTEROFFICE MEMORANDUM

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

From: Jennifer Hibit, Director of Human Resources

Cc: Terrence D. McCracken, Secretary to the Authority

Date: April 18, 2023

Subject: Leave of Absence

David Iafallo started in my department on April 3, 2023 as Coordinator of Employee Relations (Safety Officer). Mr. Iafallo has requested a leave of absence from his permanent position of Line Maintenance Operator while serving in his new position. I fully recommend approving his request.

A resolution granting Mr. Iafallo a leave of absence from his permanent position of Line Maintenance Operator while serving in his position of Coordinator of Employee Relations (Safety Coordinator). Thank you.

JH/tg

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

Contract: Project Description: <u>Authorization to Grant a Leave of Absence</u>	Project No.: _____
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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>Leave of Absence</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 type="checkbox"/> Other _____	

Approvals Needed:

APPROVED AS TO CONTENT:

<input checked="" type="checkbox"/> Director of HR	<u></u>	Date: <u>4/18/23</u>
<input type="checkbox"/> Chief Operating Officer	_____	Date: _____
<input type="checkbox"/> Executive Engineer	_____	Date: _____
<input type="checkbox"/> Director of Administration	_____	Date: _____
<input type="checkbox"/> Claims Rep/Risk Manager	_____	Date: _____
<input type="checkbox"/> Chief Financial Officer	_____	Date: _____
<input type="checkbox"/> Legal	_____	Date: _____

APPROVED FOR BOARD RESOLUTION:

<input checked="" type="checkbox"/> Secretary to the Authority	<u></u>	Date: <u>4/18/23</u>
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Remarks: _____

Resolution Date: _____	Item No: _____
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