



sanitation

Javier D. Lojan Acting Commissioner

Hyacinth Rose
Director,
Employee Operations
Human Resources

59 Maiden Lane
5th Floor
New York, NY 10038
nyc.gov/sanitation

646-885-0914
hrose@dsny.nyc.gov

January 15, 2025

Ting Chen
Actuarial Specialist
NYC Office of the Actuary
255 Greenwich Street, 9th Floor
New York, NY 10007

Dear Mr. Chen

I submit herewith a statement of financial condition of the Relief and Pension Fund of the Department of Street Cleaning of the City of New York as of June 30, 2024 and report on operations of said Fund for the year ending June 30, 2024.

During the fiscal year ending June 30, 2024, the following actions occurred:

Pensioners Deceased.....	0
Widowers Granted Pensions.....	0
Widows Deceased.....	0

As of June 30, 2024, the following appeared on the pension roll:

Pensioned Employees.....	0
Pensioned Widows.....	1
Total.....	1

This Fund has been closed to new entrants since the creation of the Department of Sanitation as of December 1, 1929. The membership has been materially lessened as a result of deaths. The last active employee retired on April 27, 1982. All membership is now confirmed to the pension categories above.

If you have any questions, please contact me at 646-885-0914.

Sincerely,

Hyacinth Rose

cc: E. Hue
File

RETIREMENT ALLOWANCE PAYROLL

CERTIFICATE No. 1

(To be signed by the Senior Accountant of the Retirement System, or other person cognizant of the facts.)

I hereby certify that each person whose name appears on the accompanying payroll sheets Nos. 1 to 14 is the lawful beneficiary of the RELIEF AND PENSION FUND and is entitled to receive the amount set opposite his or her name, and that the accompanying payroll sheets Nos. 1 to _____ are correctly summarized hereon; and that no part of the amounts charged on this payroll has been included within, has been certified for payment, or has been paid by any other payroll or voucher.

\$373.34

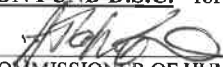


DIRECTOR, DSC PENSION UNIT

CERTIFICATE No. 2

(To be signed by the Secretary of the Retirement System.)

Upon the certificate set forth and forming a part of the summary of the attached payroll for the period and amount shown hereon, made by persons designated by me to make the same, I hereby certify that this payroll is correct, and it is therefore transmitted to the Comptroller of the City of New York as custodian of the funds of the RELIEF & PENSION FUND D.S.C. for payment from its funds.



ASSISTANT COMMISSIONER OF HUMAN RESOURCES

June 24, 2024

OFFICE OF THE COMPTROLLER CITY SUPPLEMENTAL PENSION FUND

CERTIFICATE No. 1

This Payroll contains the names of 01 Pensioners, receiving Supplemental Pension in the amount of \$323.34 in addition to their regular retirement allowance.

Title _____
Office of the Comptroller

CERTIFICATE No. 3

In accordance with Resolutions passed by the Board of Estimate, the change of personnel as submitted by the _____ Retirement System has been examined, audited and found to be correct. Payroll Sheets have been correctly summarized thereon; the amount of this Payroll is properly chargeable against the Funds indicated; and this Payroll is correct as to calculations, extensions and proper certifications.

Title _____
Office of the Comptroller

CERTIFICATE No. 2

I hereby certify that each Pensioner listed under the City Supplemental Pension Fund heading of this Payroll, is a Retired City Employee and is eligible to receive Supplemental Pension benefits under the provisions of Local Law No. 147 of the Laws of 1952, Local Law No. 46 of the Laws of 1956 or any amendment thereto.

Title D.S.C. PENSION CLERK

Secretary

THE RELIEF AND PENSION FUND
Retirement System

RUN SORT: RPCCP320701508CW I CITY OF NEW YORK PENSION PAYROLL MANAGEMENT SYSTEM
 RUN DATE: 06/21/24 PART I: PAYROLL DETAIL PAYROLL REGISTER REPORT
 RUN TIME: 21:12:31 STOCK CODE 3 - DSC PENSION PAYROLL
 PAYDATE: 06/30/24
 PAYCYCLE: M
 TOTALS FOR PAYROLL NO: 508 DSC PENSION FUND

REPORT PAGE: 2
 REPORT ID: RPCCP320
 SYSTEM: PPMS

PAY SUMMARY

SHORT DESCRIPTION	PAY TYPE DESCRIPTION	PAY TYPE AMT	RECIPIENT COUNT
ZA: ANTY RES FND			
ANNUITY AMT	ANNUITY AMT	50.00	1
	TOTAL	50.00	1
ZR: COLA			
FIXED COLA	FIXED CITY SUPPL COLA	275.01	1
SANIT SP COL	SANITATION SPECIFIC COST OF LIVING ADJUSTMENT	48.33	1
	TOTAL	323.34	2
	TOTAL GROSS PAY	373.34	3

DEDUCTION SUMMARY

DEDUCTION DESCRIPTION	DEDUCTION AMT
TOTAL DEDUCTIONS :	0.00
TOTAL NET PAY :	373.34

YEAR TO DATE SUMMARY

YTD PAY SUMMARY	
ANTY RES FND	300.00
COLA	1,940.04
YTD DEDUCTION SUMMARY	
MISCELLANEOUS D	2,240.04

REPORT PAGE: 1
REPORT ID: RPCCP320
SYSTEM: PPMS

PENSION KEY	RECIPIENT NAME		REGISTRY NO	CAUSE	OPTION	REL	DOB	DOR	CHECK ID
S-107572-0	PIPOLA	CELIA	000000	SR	0	W	08/01/17	01/16/03	300004083
TAX EXCLUSION: 3 FED MARITAL STAT: B									
PAY: ANTY RES FND		50.00	COLA	323.34					
YTD TOTALS:	GROSS: 2,240.04	COLA: 1,940.04	(S)ADB: 0.00	PARITY:	0.00	ANNUITY:	300.00	FED TAX:	0.00
GROSS PAY:	373.34	NET PAY:	373.34						

RUN SORT: RPCCP320701508CW I CITY OF NEW YORK PENSION PAYROLL MANAGEMENT SYSTEM
RUN DATE: 06/21/24 PART I: PAYROLL DETAIL PAYROLL REGISTER REPORT
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REPORT PAGE: 1
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SYSTEM: PPMS

TOTALS FOR PAYCYCLE OF GRAND TOTAL = M

<u>DEDUCTION DESCRIPTION</u>	<u>DEDUCTION AMT</u>
TOTAL DEDUCTIONS :	0.00

TOTAL NET PAY : 373.34

YEAR TO DATE SUMMARY

**** END OF RPRG3200 PART I - PAYROLL DETAIL ****

YTD PAY SUMMARY

ANTY RES FND	300.00
COLA	1,940.04

YTD DEDUCTION SUMMARY

MISCELLANEOUS D	2,240.04
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DISPLAY A REPORT

REPORT NAME . . : RPPS0030

REPORT TIMESTAMP: 2024-06-21-21.11.56

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RUN SORT: RPPS0030701508AG

RUN DATE: 06/21/24

RUN TIME: 21:11:28

CITY OF NEW YORK PENSION PAYROLL MANAGEMENT SYSTEM

RETIREMENT ALLOWANCE SUMMARY REPORT

PAY CYCLE: M

PAY DATE: 06/30/24

PAY PERIOD END DATE: 06/30/24

PAYROLL NUMBER: 508 DSC PENSION FUND

CAUSE OF RETIREMENT

PENSION OPTION	REL CODE	RECIPIENT COUNT	\$ AMOUNT
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SR SERVICE RETIREE

0	Q	1	\$373.34
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TOTAL SR SERVICE RETIREE

=====	=====
1	\$373.34

TOTAL PAYROLL 508 DSC PENSION FUND

=====	=====
1	\$373.34

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COMMAND ==>

F1=HELP

F10=LEFT

F3=EXIT

F11=RIGHT

F5=RFIND

F6=PAGE

SCROLL ==> FULL

F7=BACKWARD F8=FORWARD