



Employee Trust Funds Board Election WRS Annuitant Seat § 15.16(1)(d)

Wisconsin Department
of Employee Trust Funds
PO Box 7931
Madison WI 53707-7931
1-877-533-5020 (toll free)
Fax 608-267-4549
etf.wi.gov

To be an eligible candidate for this election, all of the following must be received by ETF by Friday, October 26, 2018:

1. Candidate information form
2. Biographical information
3. Nominating petitions (scanned in copies are acceptable) of at least 25 signatures of fellow WRS annuitants
4. Photo

Candidate Information Form

Complete the candidate information form (page 2).

Biographical Information

Submit biographical information of 150 words or less. *If you submit more than 150 words, then only the first 150 words will be published.* Include information you feel will be relevant to your candidacy. Voters will want to know:

- what Wisconsin Retirement System employers have you worked for and for how long.
- how long you have been a member of the WRS.
- any experience in your career or personal life that relates to retirement and benefit issues.

Nominating Petitions

Nominating petitions must contain at least 25 valid signatures of fellow WRS annuitants. However, we recommend obtaining more than 25 signatures (but no more than 50) in the event we are unable to read some of the signatures during the certification process. You may duplicate the enclosed *Nominating Petition* form (page 3) as many times as you wish.

Photo

Please *email* a “head and shoulders” high resolution photo suitable for publication (at least 300 dpi, full color, .jpg or .png format). This picture, along with the biographical information you supply, will be shared with all eligible voters. Photo *must* be emailed.

Submissions

Mail, submit in person or email nominating petition forms, candidate information form and biographical statement to:

Retirement Board Liaison
Department of Employee Trust Funds
P.O. Box 7931
Madison, WI 53707-7931
BoardElections@etf.wi.gov

Photo *must* be emailed.

Deadline

All submissions must be received by ETF by Friday, October 26, 2018, 4:30 p.m.

All nominating petitioners will be notified of the status of their petition by November 9, 2018.

State of Wisconsin
Department of Employee Trust Funds



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Type or print.

| Candidate Information | | | |
|--|---------------------|-------|----------|
| Name (first, middle initial, last) <i>This name will be on the ballot.</i> | | | |
| Address (include apartment, if applicable) | City | State | ZIP code |
| Telephone (home) () | (cell) () | | |
| Email address | | | |
| Signature | | | Date |

ETF Contact: Retirement Board Liaison
Department of Employee Trust Funds
PO Box 7931
Madison, WI 53707-793
608.266.0301
BoardElections@etf.wi.gov

Note: Eligible candidates for this seat **include** all annuitant members of the WRS.



Nominating Petition

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We, the undersigned, hereby nominate _____ of _____,
(printed candidate name) *(address)*

as a candidate in the election for the annuitant member of the Employee Trust Funds Retirement Board for a term of office effective May 1, 2019. We certify that we are annuitant members who were participating employees under the Wisconsin Retirement System. We further certify that we have not signed a nomination petition for any other candidate for the aforesaid office.

| Name (first middle last) <i>Print Clearly</i> | Birth Date* (MM/DD) | Signature (Must be an original signature in black or blue ink.) | Date (MM/DD/YYYY) |
|--|------------------------|---|----------------------|
| 1. | | | |
| 2. | | | |
| 3. | | | |
| 4. | | | |
| 5. | | | |
| 6. | | | |
| 7. | | | |
| 8. | | | |
| 9. | | | |
| 10. | | | |

*Needed by the Department of Employee Trust Funds to verify your eligibility to sign this petition.

Nominee Certification

I certify that I am an annuitant participant of the WRS. I further certify that, to the best of my knowledge and belief, the persons signing this petition were, at the time of signing, annuitant participants of the WRS. If elected, I agree to serve a term as the annuitant member of the Employee Trust Funds Board, effective May 1, 2019 and expiring May 1, 2023.

| | |
|------------------|--------------------------|
| Signature | Date (MM/DD/YYYY) |
|------------------|--------------------------|