



Nomination Petition 2021 CalPERS Board of Administration Member-At-Large Election

This Nomination Petition form, endorsed with at least 250 original signatures of eligible active or retired members, must be received by the California Public Employees' Retirement System at the address below no later than 5:00 p.m. on May 17, 2021. Only Nomination Petition forms supplied by CalPERS will be accepted.

California Public Employees' Retirement System

Attention: CalPERS Board Election Coordinator
Lincoln Plaza - 400 Q Street, Room W2580
P.O. Box 942702
Sacramento, CA 94229-2702
Telephone: (916) 795-3952, local, or (800) 794-2297, toll free

Nomination

We, the undersigned, active and retired members of the California Public Employees' Retirement System, place in nomination _____ as a member to the Board of Administration, California Public Employees' Retirement System. The nominee is employed by (agency) _____.

Form fields for Nominee's Street Address, Last Four Digits of the Social Security Number, City, State, Zip Code, Signature of Nominee, Nominee's Daytime Telephone Number, Nominee's E-Mail Address, and Nominee's Fax Number.

Information Needed for Verification of System Membership

Table with 3 columns: Name* (Type/Print) & Signature, Last Four Digits of the Social Security Number*, and (Employed by/Retired from) (Agency Name). Includes a numbered entry '1.' with corresponding fields.

* NOTE: The last name and the last four digits of the Social Security number information is being sought for the sole purpose of verifying CalPERS membership against the CalPERS database. Be advised that in some cases, the information provided may not be sufficient to verify CalPERS membership or may delay verification of eligible signers. In the event CalPERS membership cannot be verified, the signature will be deemed invalid and not counted. Nomination Petitions, including signatories, may be subject to public review.

Nomination Petition 2021 CalPERS Board of Administration Member-At-Large Election, for: _____

Name* (Type/Print) & Signature	Last Four Digits of the Social Security Number*	(Employed by/Retired from) (Agency Name)
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2. _____ (Type/Print Name Clearly) _____ (Signature)	XXX – XX – _____	_____ (Employed by/Retired from) (Agency Name)
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3. _____ (Type/Print Name Clearly) _____ (Signature)	XXX – XX – _____	_____ (Employed by/Retired from) (Agency Name)
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4. _____ (Type/Print Name Clearly) _____ (Signature)	XXX – XX – _____	_____ (Employed by/Retired from) (Agency Name)
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5. _____ (Type/Print Name Clearly) _____ (Signature)	XXX – XX – _____	_____ (Employed by/Retired from) (Agency Name)
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6. _____ (Type/Print Name Clearly) _____ (Signature)	XXX – XX – _____	_____ (Employed by/Retired from) (Agency Name)
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7. _____ (Type/Print Name Clearly) _____ (Signature)	XXX – XX – _____	_____ (Employed by/Retired from) (Agency Name)
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* **NOTE:** The last name and the last four digits of the Social Security number information is being sought for the sole purpose of verifying CalPERS membership against the CalPERS database. Be advised that in some cases, the information provided may not be sufficient to verify CalPERS membership or may delay verification of eligible signers. In the event CalPERS membership cannot be verified, the signature will be deemed invalid and not counted. Nomination Petitions, including signatories, may be subject to public review.