



Nomination Petition 2025 CalPERS Board of Administration Member-At-Large Position B Election

The Nomination Petition Form, endorsed with **at least 250 original signatures of eligible active or retired CalPERS members**, must be received by the California Public Employees' Retirement System (CalPERS) at the address below **no later than May 15, 2025, 5:00 p.m.** Only Nomination Petition Forms supplied by CalPERS will be accepted.

CalPERS

Attention: CalPERS Board Election Coordinator
Lincoln Plaza – 400 Q Street, Room W1570
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 or retired from (agency) _____.

_____			XXX – XX – _____
Nominee's Street Address			Last Four Digits of the Social Security Number*
_____	_____	_____	_____
City	State	Zip Code	Signature of Nominee Consenting to Nomination
(_____)	_____		_____
Nominee's Daytime Telephone Number			Nominee's E-Mail Address

Information Needed for Verification of System Membership

Name* (Type/Print) & Signature	Last Four Digits of the Social Security Number*	(Employed by/Retired from) (Agency Name)
1. _____	XXX – XX – _____	_____
(Type/Print Name Clearly)		(Employed by/Retired from) (Agency Name)

(Signature)		

* **NOTE:** The last name and the last four digits of the Social Security number information are 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 2025 CalPERS Board of Administration Member-At-Large Position B Election, for: _____

Name* (Type/Print) & Signature

Last Four Digits of the Social Security Number*

(Employed by/Retired from) (Agency Name)

2.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from) (Agency Name)

(Signature)

3.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from) (Agency Name)

(Signature)

4.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from) (Agency Name)

(Signature)

5.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from) (Agency Name)

(Signature)

6.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from) (Agency Name)

(Signature)

7.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from) (Agency Name)

(Signature)

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Nomination Petition 2025 CalPERS Board of Administration Member-At-Large Position B Election, for: _____

Name* (Type/Print) & Signature Last Four Digits of the Social Security Number* (Employed by/Retired from) (Agency Name)

8. _____
(Type/Print Name Clearly) **XXX – XX –** _____

(Signature) _____
(Employed by/Retired from) (Agency Name)

9. _____
(Type/Print Name Clearly) **XXX – XX –** _____

(Signature) _____
(Employed by/Retired from) (Agency Name)

10. _____
(Type/Print Name Clearly) **XXX – XX –** _____

(Signature) _____
(Employed by/Retired from) (Agency Name)

11. _____
(Type/Print Name Clearly) **XXX – XX –** _____

(Signature) _____
(Employed by/Retired from) (Agency Name)

12. _____
(Type/Print Name Clearly) **XXX – XX –** _____

(Signature) _____
(Employed by/Retired from) (Agency Name)

13. _____
(Type/Print Name Clearly) **XXX – XX –** _____

(Signature) _____
(Employed by/Retired from) (Agency Name)

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Name* (Type/Print) & Signature

Last Four Digits of the Social Security Number*

(Employed by/Retired from) (Agency Name)

14.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from) (Agency Name)

(Signature)

15.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from) (Agency Name)

(Signature)

16.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from) (Agency Name)

(Signature)

17.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from) (Agency Name)

(Signature)

18.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from) (Agency Name)

(Signature)

19.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from) (Agency Name)

(Signature)

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Nomination Petition 2025 CalPERS Board of Administration Member-At-Large Position B Election, for: _____

Name* (Type/Print) & Signature

Last Four Digits of the Social Security Number*

(Employed by/Retired from) (Agency Name)

20.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from) (Agency Name)

(Signature)

21.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from) (Agency Name)

(Signature)

22.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from) (Agency Name)

(Signature)

23.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from) (Agency Name)

(Signature)

24.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from) (Agency Name)

(Signature)

25.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from) (Agency Name)

(Signature)

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Nomination Petition 2025 CalPERS Board of Administration Member-At-Large Position B Election, for: _____

Name* (Type/Print) & Signature Last Four Digits of the Social Security Number* (Employed by/Retired from) (Agency Name)

26. _____
(Type/Print Name Clearly) **XXX – XX –** _____

(Signature) _____
(Employed by/Retired from) (Agency Name)

27. _____
(Type/Print Name Clearly) **XXX – XX –** _____

(Signature) _____
(Employed by/Retired from) (Agency Name)

28. _____
(Type/Print Name Clearly) **XXX – XX –** _____

(Signature) _____
(Employed by/Retired from) (Agency Name)

29. _____
(Type/Print Name Clearly) **XXX – XX –** _____

(Signature) _____
(Employed by/Retired from) (Agency Name)

30. _____
(Type/Print Name Clearly) **XXX – XX –** _____

(Signature) _____
(Employed by/Retired from) (Agency Name)

31. _____
(Type/Print Name Clearly) **XXX – XX –** _____

(Signature) _____
(Employed by/Retired from) (Agency Name)

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Nomination Petition 2025 CalPERS Board of Administration Member-At-Large Position B Election, for: _____

Name* (Type/Print) & Signature

Last Four Digits of the
Social Security Number*

(Employed by/Retired from)
(Agency Name)

32.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from)
(Agency Name)

(Signature)

33.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from)
(Agency Name)

(Signature)

34.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from)
(Agency Name)

(Signature)

35.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from)
(Agency Name)

(Signature)

36.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from)
(Agency Name)

(Signature)

37.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from)
(Agency Name)

(Signature)

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Nomination Petition 2025 CalPERS Board of Administration Member-At-Large Position B Election, for: _____

Name* (Type/Print) & Signature Last Four Digits of the Social Security Number* (Employed by/Retired from) (Agency Name)

38. _____
(Type/Print Name Clearly) **XXX – XX –** _____

(Signature) _____
(Employed by/Retired from) (Agency Name)

39. _____
(Type/Print Name Clearly) **XXX – XX –** _____

(Signature) _____
(Employed by/Retired from) (Agency Name)

40. _____
(Type/Print Name Clearly) **XXX – XX –** _____

(Signature) _____
(Employed by/Retired from) (Agency Name)

41. _____
(Type/Print Name Clearly) **XXX – XX –** _____

(Signature) _____
(Employed by/Retired from) (Agency Name)

42. _____
(Type/Print Name Clearly) **XXX – XX –** _____

(Signature) _____
(Employed by/Retired from) (Agency Name)

43. _____
(Type/Print Name Clearly) **XXX – XX –** _____

(Signature) _____
(Employed by/Retired from) (Agency Name)

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Nomination Petition 2025 CalPERS Board of Administration Member-At-Large Position B Election, for: _____

Name* (Type/Print) & Signature Last Four Digits of the Social Security Number* (Employed by/Retired from) (Agency Name)

44. _____
(Type/Print Name Clearly) **XXX – XX –** _____

(Signature) _____
(Employed by/Retired from) (Agency Name)

45. _____
(Type/Print Name Clearly) **XXX – XX –** _____

(Signature) _____
(Employed by/Retired from) (Agency Name)

46. _____
(Type/Print Name Clearly) **XXX – XX –** _____

(Signature) _____
(Employed by/Retired from) (Agency Name)

47. _____
(Type/Print Name Clearly) **XXX – XX –** _____

(Signature) _____
(Employed by/Retired from) (Agency Name)

48. _____
(Type/Print Name Clearly) **XXX – XX –** _____

(Signature) _____
(Employed by/Retired from) (Agency Name)

49. _____
(Type/Print Name Clearly) **XXX – XX –** _____

(Signature) _____
(Employed by/Retired from) (Agency Name)

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Name* (Type/Print) & Signature Last Four Digits of the Social Security Number* (Employed by/Retired from) (Agency Name)

50. _____
(Type/Print Name Clearly) **XXX – XX –** _____

(Signature) _____
(Employed by/Retired from) (Agency Name)

51. _____
(Type/Print Name Clearly) **XXX – XX –** _____

(Signature) _____
(Employed by/Retired from) (Agency Name)

52. _____
(Type/Print Name Clearly) **XXX – XX –** _____

(Signature) _____
(Employed by/Retired from) (Agency Name)

53. _____
(Type/Print Name Clearly) **XXX – XX –** _____

(Signature) _____
(Employed by/Retired from) (Agency Name)

54. _____
(Type/Print Name Clearly) **XXX – XX –** _____

(Signature) _____
(Employed by/Retired from) (Agency Name)

55. _____
(Type/Print Name Clearly) **XXX – XX –** _____

(Signature) _____
(Employed by/Retired from) (Agency Name)

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Name* (Type/Print) & Signature Last Four Digits of the Social Security Number* (Employed by/Retired from) (Agency Name)

56. _____
(Type/Print Name Clearly) **XXX – XX –** _____

(Signature) _____
(Employed by/Retired from) (Agency Name)

57. _____
(Type/Print Name Clearly) **XXX – XX –** _____

(Signature) _____
(Employed by/Retired from) (Agency Name)

58. _____
(Type/Print Name Clearly) **XXX – XX –** _____

(Signature) _____
(Employed by/Retired from) (Agency Name)

59. _____
(Type/Print Name Clearly) **XXX – XX –** _____

(Signature) _____
(Employed by/Retired from) (Agency Name)

60. _____
(Type/Print Name Clearly) **XXX – XX –** _____

(Signature) _____
(Employed by/Retired from) (Agency Name)

61. _____
(Type/Print Name Clearly) **XXX – XX –** _____

(Signature) _____
(Employed by/Retired from) (Agency Name)

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Name* (Type/Print) & Signature Last Four Digits of the Social Security Number* (Employed by/Retired from) (Agency Name)

62. _____
(Type/Print Name Clearly) **XXX – XX –** _____

(Signature) _____
(Employed by/Retired from) (Agency Name)

63. _____
(Type/Print Name Clearly) **XXX – XX –** _____

(Signature) _____
(Employed by/Retired from) (Agency Name)

64. _____
(Type/Print Name Clearly) **XXX – XX –** _____

(Signature) _____
(Employed by/Retired from) (Agency Name)

65. _____
(Type/Print Name Clearly) **XXX – XX –** _____

(Signature) _____
(Employed by/Retired from) (Agency Name)

66. _____
(Type/Print Name Clearly) **XXX – XX –** _____

(Signature) _____
(Employed by/Retired from) (Agency Name)

67. _____
(Type/Print Name Clearly) **XXX – XX –** _____

(Signature) _____
(Employed by/Retired from) (Agency Name)

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Name* (Type/Print) & Signature

Last Four Digits of the Social Security Number*

(Employed by/Retired from) (Agency Name)

68.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from) (Agency Name)

(Signature)

69.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from) (Agency Name)

(Signature)

70.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from) (Agency Name)

(Signature)

71.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from) (Agency Name)

(Signature)

72.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from) (Agency Name)

(Signature)

73.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from) (Agency Name)

(Signature)

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Name* (Type/Print) & Signature	Last Four Digits of the Social Security Number*	(Employed by/Retired from) (Agency Name)
--------------------------------	---	--

74. _____ (Type/Print Name Clearly) _____ (Signature)	XXX – XX – _____	_____ (Employed by/Retired from) (Agency Name)
--	-------------------------	---

75. _____ (Type/Print Name Clearly) _____ (Signature)	XXX – XX – _____	_____ (Employed by/Retired from) (Agency Name)
--	-------------------------	---

76. _____ (Type/Print Name Clearly) _____ (Signature)	XXX – XX – _____	_____ (Employed by/Retired from) (Agency Name)
--	-------------------------	---

77. _____ (Type/Print Name Clearly) _____ (Signature)	XXX – XX – _____	_____ (Employed by/Retired from) (Agency Name)
--	-------------------------	---

78. _____ (Type/Print Name Clearly) _____ (Signature)	XXX – XX – _____	_____ (Employed by/Retired from) (Agency Name)
--	-------------------------	---

79. _____ (Type/Print Name Clearly) _____ (Signature)	XXX – XX – _____	_____ (Employed by/Retired from) (Agency Name)
--	-------------------------	---

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Name* (Type/Print) & Signature

Last Four Digits of the Social Security Number*

(Employed by/Retired from) (Agency Name)

80.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from) (Agency Name)

(Signature)

81.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from) (Agency Name)

(Signature)

82.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from) (Agency Name)

(Signature)

83.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from) (Agency Name)

(Signature)

84.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from) (Agency Name)

(Signature)

85.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from) (Agency Name)

(Signature)

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Name* (Type/Print) & Signature

Last Four Digits of the
Social Security Number*

(Employed by/Retired from)
(Agency Name)

86.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from)
(Agency Name)

(Signature)

87.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from)
(Agency Name)

(Signature)

88.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from)
(Agency Name)

(Signature)

89.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from)
(Agency Name)

(Signature)

90.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from)
(Agency Name)

(Signature)

91.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from)
(Agency Name)

(Signature)

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Nomination Petition 2025 CalPERS Board of Administration Member-At-Large Position B Election, for: _____

Name* (Type/Print) & Signature Last Four Digits of the Social Security Number* (Employed by/Retired from) (Agency Name)

92. _____
(Type/Print Name Clearly) **XXX – XX –** _____

(Signature) _____
(Employed by/Retired from) (Agency Name)

93. _____
(Type/Print Name Clearly) **XXX – XX –** _____

(Signature) _____
(Employed by/Retired from) (Agency Name)

94. _____
(Type/Print Name Clearly) **XXX – XX –** _____

(Signature) _____
(Employed by/Retired from) (Agency Name)

95. _____
(Type/Print Name Clearly) **XXX – XX –** _____

(Signature) _____
(Employed by/Retired from) (Agency Name)

96. _____
(Type/Print Name Clearly) **XXX – XX –** _____

(Signature) _____
(Employed by/Retired from) (Agency Name)

97. _____
(Type/Print Name Clearly) **XXX – XX –** _____

(Signature) _____
(Employed by/Retired from) (Agency Name)

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Name* (Type/Print) & Signature

Last Four Digits of the Social Security Number*

(Employed by/Retired from) (Agency Name)

98.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from) (Agency Name)

(Signature)

99.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from) (Agency Name)

(Signature)

100.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from) (Agency Name)

(Signature)

101.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from) (Agency Name)

(Signature)

102.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from) (Agency Name)

(Signature)

103.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from) (Agency Name)

(Signature)

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Name* (Type/Print) & Signature

Last Four Digits of the Social Security Number*

(Employed by/Retired from) (Agency Name)

104.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from) (Agency Name)

(Signature)

105.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from) (Agency Name)

(Signature)

106.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from) (Agency Name)

(Signature)

107.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from) (Agency Name)

(Signature)

108.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from) (Agency Name)

(Signature)

109.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from) (Agency Name)

(Signature)

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Nomination Petition 2025 CalPERS Board of Administration Member-At-Large Position B Election, for: _____

Name* (Type/Print) & Signature

Last Four Digits of the Social Security Number*

(Employed by/Retired from) (Agency Name)

110.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from) (Agency Name)

(Signature)

111.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from) (Agency Name)

(Signature)

112.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from) (Agency Name)

(Signature)

113.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from) (Agency Name)

(Signature)

114.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from) (Agency Name)

(Signature)

115.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from) (Agency Name)

(Signature)

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Nomination Petition 2025 CalPERS Board of Administration Member-At-Large Position B Election, for: _____

Name* (Type/Print) & Signature Last Four Digits of the Social Security Number* (Employed by/Retired from) (Agency Name)

116. _____
(Type/Print Name Clearly) **XXX – XX –** _____

(Signature) _____
(Employed by/Retired from) (Agency Name)

117. _____
(Type/Print Name Clearly) **XXX – XX –** _____

(Signature) _____
(Employed by/Retired from) (Agency Name)

118. _____
(Type/Print Name Clearly) **XXX – XX –** _____

(Signature) _____
(Employed by/Retired from) (Agency Name)

119. _____
(Type/Print Name Clearly) **XXX – XX –** _____

(Signature) _____
(Employed by/Retired from) (Agency Name)

120. _____
(Type/Print Name Clearly) **XXX – XX –** _____

(Signature) _____
(Employed by/Retired from) (Agency Name)

121. _____
(Type/Print Name Clearly) **XXX – XX –** _____

(Signature) _____
(Employed by/Retired from) (Agency Name)

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Nomination Petition 2025 CalPERS Board of Administration Member-At-Large Position B Election, for: _____

Name* (Type/Print) & Signature Last Four Digits of the Social Security Number* (Employed by/Retired from) (Agency Name)

122. _____
(Type/Print Name Clearly) **XXX – XX –** _____

(Signature) _____
(Employed by/Retired from) (Agency Name)

123. _____
(Type/Print Name Clearly) **XXX – XX –** _____

(Signature) _____
(Employed by/Retired from) (Agency Name)

124. _____
(Type/Print Name Clearly) **XXX – XX –** _____

(Signature) _____
(Employed by/Retired from) (Agency Name)

125. _____
(Type/Print Name Clearly) **XXX – XX –** _____

(Signature) _____
(Employed by/Retired from) (Agency Name)

126. _____
(Type/Print Name Clearly) **XXX – XX –** _____

(Signature) _____
(Employed by/Retired from) (Agency Name)

127. _____
(Type/Print Name Clearly) **XXX – XX –** _____

(Signature) _____
(Employed by/Retired from) (Agency Name)

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Nomination Petition 2025 CalPERS Board of Administration Member-At-Large Position B Election, for: _____

Name* (Type/Print) & Signature

Last Four Digits of the Social Security Number*

(Employed by/Retired from) (Agency Name)

128.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from) (Agency Name)

(Signature)

129.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from) (Agency Name)

(Signature)

130.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from) (Agency Name)

(Signature)

131.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from) (Agency Name)

(Signature)

132.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from) (Agency Name)

(Signature)

133.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from) (Agency Name)

(Signature)

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Nomination Petition 2025 CalPERS Board of Administration Member-At-Large Position B Election, for: _____

Name* (Type/Print) & Signature

Last Four Digits of the
Social Security Number*

(Employed by/Retired from)
(Agency Name)

134.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from)
(Agency Name)

(Signature)

135.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from)
(Agency Name)

(Signature)

136.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from)
(Agency Name)

(Signature)

137.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from)
(Agency Name)

(Signature)

138.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from)
(Agency Name)

(Signature)

139.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from)
(Agency Name)

(Signature)

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Nomination Petition 2025 CalPERS Board of Administration Member-At-Large Position B Election, for: _____

Name* (Type/Print) & Signature

Last Four Digits of the
Social Security Number*

(Employed by/Retired from)
(Agency Name)

140.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from)
(Agency Name)

(Signature)

141.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from)
(Agency Name)

(Signature)

142.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from)
(Agency Name)

(Signature)

143.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from)
(Agency Name)

(Signature)

144.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from)
(Agency Name)

(Signature)

145.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from)
(Agency Name)

(Signature)

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Nomination Petition 2025 CalPERS Board of Administration Member-At-Large Position B Election, for: _____

Name* (Type/Print) & Signature Last Four Digits of the Social Security Number* (Employed by/Retired from) (Agency Name)

146. _____
(Type/Print Name Clearly) **XXX – XX –** _____

(Signature) _____
(Employed by/Retired from) (Agency Name)

147. _____
(Type/Print Name Clearly) **XXX – XX –** _____

(Signature) _____
(Employed by/Retired from) (Agency Name)

148. _____
(Type/Print Name Clearly) **XXX – XX –** _____

(Signature) _____
(Employed by/Retired from) (Agency Name)

149. _____
(Type/Print Name Clearly) **XXX – XX –** _____

(Signature) _____
(Employed by/Retired from) (Agency Name)

150. _____
(Type/Print Name Clearly) **XXX – XX –** _____

(Signature) _____
(Employed by/Retired from) (Agency Name)

151. _____
(Type/Print Name Clearly) **XXX – XX –** _____

(Signature) _____
(Employed by/Retired from) (Agency Name)

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Nomination Petition 2025 CalPERS Board of Administration Member-At-Large Position B Election, for: _____

Name* (Type/Print) & Signature

Last Four Digits of the
Social Security Number*

(Employed by/Retired from)
(Agency Name)

152.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from)
(Agency Name)

(Signature)

153.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from)
(Agency Name)

(Signature)

154.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from)
(Agency Name)

(Signature)

155.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from)
(Agency Name)

(Signature)

156.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from)
(Agency Name)

(Signature)

157.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from)
(Agency Name)

(Signature)

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Name* (Type/Print) & Signature

Last Four Digits of the Social Security Number*

(Employed by/Retired from) (Agency Name)

158.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from) (Agency Name)

(Signature)

159.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from) (Agency Name)

(Signature)

160.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from) (Agency Name)

(Signature)

161.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from) (Agency Name)

(Signature)

162.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from) (Agency Name)

(Signature)

163.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from) (Agency Name)

(Signature)

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Name* (Type/Print) & Signature

Last Four Digits of the
Social Security Number*

(Employed by/Retired from)
(Agency Name)

164.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from)
(Agency Name)

(Signature)

165.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from)
(Agency Name)

(Signature)

166.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from)
(Agency Name)

(Signature)

167.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from)
(Agency Name)

(Signature)

168.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from)
(Agency Name)

(Signature)

169.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from)
(Agency Name)

(Signature)

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Name* (Type/Print) & Signature Last Four Digits of the Social Security Number* (Employed by/Retired from) (Agency Name)

170. _____
(Type/Print Name Clearly) **XXX – XX –** _____

(Signature) _____
(Employed by/Retired from) (Agency Name)

171. _____
(Type/Print Name Clearly) **XXX – XX –** _____

(Signature) _____
(Employed by/Retired from) (Agency Name)

172. _____
(Type/Print Name Clearly) **XXX – XX –** _____

(Signature) _____
(Employed by/Retired from) (Agency Name)

173. _____
(Type/Print Name Clearly) **XXX – XX –** _____

(Signature) _____
(Employed by/Retired from) (Agency Name)

174. _____
(Type/Print Name Clearly) **XXX – XX –** _____

(Signature) _____
(Employed by/Retired from) (Agency Name)

175. _____
(Type/Print Name Clearly) **XXX – XX –** _____

(Signature) _____
(Employed by/Retired from) (Agency Name)

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Name* (Type/Print) & Signature

Last Four Digits of the Social Security Number*

(Employed by/Retired from) (Agency Name)

176.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from) (Agency Name)

(Signature)

177.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from) (Agency Name)

(Signature)

178.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from) (Agency Name)

(Signature)

179.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from) (Agency Name)

(Signature)

180.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from) (Agency Name)

(Signature)

181.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from) (Agency Name)

(Signature)

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Nomination Petition 2025 CalPERS Board of Administration Member-At-Large Position B Election, for: _____

Name* (Type/Print) & Signature Last Four Digits of the Social Security Number* (Employed by/Retired from) (Agency Name)

182. _____
(Type/Print Name Clearly) **XXX – XX –** _____

(Signature) _____
(Employed by/Retired from) (Agency Name)

183. _____
(Type/Print Name Clearly) **XXX – XX –** _____

(Signature) _____
(Employed by/Retired from) (Agency Name)

184. _____
(Type/Print Name Clearly) **XXX – XX –** _____

(Signature) _____
(Employed by/Retired from) (Agency Name)

185. _____
(Type/Print Name Clearly) **XXX – XX –** _____

(Signature) _____
(Employed by/Retired from) (Agency Name)

186. _____
(Type/Print Name Clearly) **XXX – XX –** _____

(Signature) _____
(Employed by/Retired from) (Agency Name)

187. _____
(Type/Print Name Clearly) **XXX – XX –** _____

(Signature) _____
(Employed by/Retired from) (Agency Name)

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Nomination Petition 2025 CalPERS Board of Administration Member-At-Large Position B Election, for: _____

Name* (Type/Print) & Signature

Last Four Digits of the
Social Security Number*

(Employed by/Retired from)
(Agency Name)

188.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from)
(Agency Name)

(Signature)

189.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from)
(Agency Name)

(Signature)

190.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from)
(Agency Name)

(Signature)

191.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from)
(Agency Name)

(Signature)

192.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from)
(Agency Name)

(Signature)

193.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from)
(Agency Name)

(Signature)

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Nomination Petition 2025 CalPERS Board of Administration Member-At-Large Position B Election, for: _____

Name* (Type/Print) & Signature

Last Four Digits of the
Social Security Number*

(Employed by/Retired from)
(Agency Name)

194.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from)
(Agency Name)

(Signature)

195.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from)
(Agency Name)

(Signature)

196.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from)
(Agency Name)

(Signature)

197.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from)
(Agency Name)

(Signature)

198.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from)
(Agency Name)

(Signature)

199.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from)
(Agency Name)

(Signature)

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Nomination Petition 2025 CalPERS Board of Administration Member-At-Large Position B Election, for: _____

Name* (Type/Print) & Signature

Last Four Digits of the
Social Security Number*

(Employed by/Retired from)
(Agency Name)

200.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from)
(Agency Name)

(Signature)

201.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from)
(Agency Name)

(Signature)

202.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from)
(Agency Name)

(Signature)

203.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from)
(Agency Name)

(Signature)

204.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from)
(Agency Name)

(Signature)

205.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from)
(Agency Name)

(Signature)

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Nomination Petition 2025 CalPERS Board of Administration Member-At-Large Position B Election, for: _____

Name* (Type/Print) & Signature Last Four Digits of the Social Security Number* (Employed by/Retired from) (Agency Name)

206. _____
(Type/Print Name Clearly) **XXX – XX –** _____

(Signature) _____
(Employed by/Retired from) (Agency Name)

207. _____
(Type/Print Name Clearly) **XXX – XX –** _____

(Signature) _____
(Employed by/Retired from) (Agency Name)

208. _____
(Type/Print Name Clearly) **XXX – XX –** _____

(Signature) _____
(Employed by/Retired from) (Agency Name)

209. _____
(Type/Print Name Clearly) **XXX – XX –** _____

(Signature) _____
(Employed by/Retired from) (Agency Name)

210. _____
(Type/Print Name Clearly) **XXX – XX –** _____

(Signature) _____
(Employed by/Retired from) (Agency Name)

211. _____
(Type/Print Name Clearly) **XXX – XX –** _____

(Signature) _____
(Employed by/Retired from) (Agency Name)

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Nomination Petition 2025 CalPERS Board of Administration Member-At-Large Position B Election, for: _____

Name* (Type/Print) & Signature

Last Four Digits of the Social Security Number*

(Employed by/Retired from) (Agency Name)

212.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from) (Agency Name)

(Signature)

213.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from) (Agency Name)

(Signature)

214.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from) (Agency Name)

(Signature)

215.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from) (Agency Name)

(Signature)

216.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from) (Agency Name)

(Signature)

217.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from) (Agency Name)

(Signature)

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Nomination Petition 2025 CalPERS Board of Administration Member-At-Large Position B Election, for: _____

Name* (Type/Print) & Signature Last Four Digits of the Social Security Number* (Employed by/Retired from) (Agency Name)

218. _____
(Type/Print Name Clearly) **XXX – XX –** _____

(Signature) _____
(Employed by/Retired from) (Agency Name)

219. _____
(Type/Print Name Clearly) **XXX – XX –** _____

(Signature) _____
(Employed by/Retired from) (Agency Name)

220. _____
(Type/Print Name Clearly) **XXX – XX –** _____

(Signature) _____
(Employed by/Retired from) (Agency Name)

221. _____
(Type/Print Name Clearly) **XXX – XX –** _____

(Signature) _____
(Employed by/Retired from) (Agency Name)

222. _____
(Type/Print Name Clearly) **XXX – XX –** _____

(Signature) _____
(Employed by/Retired from) (Agency Name)

223. _____
(Type/Print Name Clearly) **XXX – XX –** _____

(Signature) _____
(Employed by/Retired from) (Agency Name)

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Nomination Petition 2025 CalPERS Board of Administration Member-At-Large Position B Election, for: _____

Name* (Type/Print) & Signature Last Four Digits of the Social Security Number* (Employed by/Retired from) (Agency Name)

224. _____
(Type/Print Name Clearly) **XXX – XX –** _____

(Signature) _____
(Employed by/Retired from) (Agency Name)

225. _____
(Type/Print Name Clearly) **XXX – XX –** _____

(Signature) _____
(Employed by/Retired from) (Agency Name)

226. _____
(Type/Print Name Clearly) **XXX – XX –** _____

(Signature) _____
(Employed by/Retired from) (Agency Name)

227. _____
(Type/Print Name Clearly) **XXX – XX –** _____

(Signature) _____
(Employed by/Retired from) (Agency Name)

228. _____
(Type/Print Name Clearly) **XXX – XX –** _____

(Signature) _____
(Employed by/Retired from) (Agency Name)

229. _____
(Type/Print Name Clearly) **XXX – XX –** _____

(Signature) _____
(Employed by/Retired from) (Agency Name)

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Nomination Petition 2025 CalPERS Board of Administration Member-At-Large Position B Election, for: _____

Name* (Type/Print) & Signature

Last Four Digits of the
Social Security Number*

(Employed by/Retired from)
(Agency Name)

230.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from)
(Agency Name)

(Signature)

231.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from)
(Agency Name)

(Signature)

232.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from)
(Agency Name)

(Signature)

233.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from)
(Agency Name)

(Signature)

234.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from)
(Agency Name)

(Signature)

235.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from)
(Agency Name)

(Signature)

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Nomination Petition 2025 CalPERS Board of Administration Member-At-Large Position B Election, for: _____

Name* (Type/Print) & Signature

Last Four Digits of the Social Security Number*

(Employed by/Retired from) (Agency Name)

236.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from) (Agency Name)

(Signature)

237.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from) (Agency Name)

(Signature)

238.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from) (Agency Name)

(Signature)

239.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from) (Agency Name)

(Signature)

240.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from) (Agency Name)

(Signature)

241.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from) (Agency Name)

(Signature)

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Name* (Type/Print) & Signature

Last Four Digits of the
Social Security Number*

(Employed by/Retired from)
(Agency Name)

242.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from)
(Agency Name)

(Signature)

243.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from)
(Agency Name)

(Signature)

244.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from)
(Agency Name)

(Signature)

245.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from)
(Agency Name)

(Signature)

246.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from)
(Agency Name)

(Signature)

247.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from)
(Agency Name)

(Signature)

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Nomination Petition 2025 CalPERS Board of Administration Member-At-Large Position B Election, for: _____

Name* (Type/Print) & Signature Last Four Digits of the Social Security Number* (Employed by/Retired from) (Agency Name)

248. _____
(Type/Print Name Clearly) **XXX – XX –** _____

(Signature) _____
(Employed by/Retired from) (Agency Name)

249. _____
(Type/Print Name Clearly) **XXX – XX –** _____

(Signature) _____
(Employed by/Retired from) (Agency Name)

250. _____
(Type/Print Name Clearly) **XXX – XX –** _____

(Signature) _____
(Employed by/Retired from) (Agency Name)

251. _____
(Type/Print Name Clearly) **XXX – XX –** _____

(Signature) _____
(Employed by/Retired from) (Agency Name)

252. _____
(Type/Print Name Clearly) **XXX – XX –** _____

(Signature) _____
(Employed by/Retired from) (Agency Name)

253. _____
(Type/Print Name Clearly) **XXX – XX –** _____

(Signature) _____
(Employed by/Retired from) (Agency Name)

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Name* (Type/Print) & Signature Last Four Digits of the Social Security Number* (Employed by/Retired from) (Agency Name)

254. _____
(Type/Print Name Clearly) **XXX – XX –** _____

(Signature) _____
(Employed by/Retired from) (Agency Name)

255. _____
(Type/Print Name Clearly) **XXX – XX –** _____

(Signature) _____
(Employed by/Retired from) (Agency Name)

256. _____
(Type/Print Name Clearly) **XXX – XX –** _____

(Signature) _____
(Employed by/Retired from) (Agency Name)

257. _____
(Type/Print Name Clearly) **XXX – XX –** _____

(Signature) _____
(Employed by/Retired from) (Agency Name)

258. _____
(Type/Print Name Clearly) **XXX – XX –** _____

(Signature) _____
(Employed by/Retired from) (Agency Name)

259. _____
(Type/Print Name Clearly) **XXX – XX –** _____

(Signature) _____
(Employed by/Retired from) (Agency Name)

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Nomination Petition 2025 CalPERS Board of Administration Member-At-Large Position B Election, for: _____

Name* (Type/Print) & Signature Last Four Digits of the Social Security Number* (Employed by/Retired from) (Agency Name)

260. _____
(Type/Print Name Clearly) **XXX – XX –** _____

(Signature) _____
(Employed by/Retired from) (Agency Name)

261. _____
(Type/Print Name Clearly) **XXX – XX –** _____

(Signature) _____
(Employed by/Retired from) (Agency Name)

262. _____
(Type/Print Name Clearly) **XXX – XX –** _____

(Signature) _____
(Employed by/Retired from) (Agency Name)

263. _____
(Type/Print Name Clearly) **XXX – XX –** _____

(Signature) _____
(Employed by/Retired from) (Agency Name)

264. _____
(Type/Print Name Clearly) **XXX – XX –** _____

(Signature) _____
(Employed by/Retired from) (Agency Name)

265. _____
(Type/Print Name Clearly) **XXX – XX –** _____

(Signature) _____
(Employed by/Retired from) (Agency Name)

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Name* (Type/Print) & Signature Last Four Digits of the Social Security Number* (Employed by/Retired from) (Agency Name)

266. _____
(Type/Print Name Clearly) **XXX – XX –** _____

(Signature) _____
(Employed by/Retired from) (Agency Name)

267. _____
(Type/Print Name Clearly) **XXX – XX –** _____

(Signature) _____
(Employed by/Retired from) (Agency Name)

268. _____
(Type/Print Name Clearly) **XXX – XX –** _____

(Signature) _____
(Employed by/Retired from) (Agency Name)

269. _____
(Type/Print Name Clearly) **XXX – XX –** _____

(Signature) _____
(Employed by/Retired from) (Agency Name)

270. _____
(Type/Print Name Clearly) **XXX – XX –** _____

(Signature) _____
(Employed by/Retired from) (Agency Name)

271. _____
(Type/Print Name Clearly) **XXX – XX –** _____

(Signature) _____
(Employed by/Retired from) (Agency Name)

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Nomination Petition 2025 CalPERS Board of Administration Member-At-Large Position B Election, for: _____

Name* (Type/Print) & Signature

Last Four Digits of the
Social Security Number*

(Employed by/Retired from)
(Agency Name)

272.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from)
(Agency Name)

(Signature)

273.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from)
(Agency Name)

(Signature)

274.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from)
(Agency Name)

(Signature)

275.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from)
(Agency Name)

(Signature)

276.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from)
(Agency Name)

(Signature)

277.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from)
(Agency Name)

(Signature)

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Nomination Petition 2025 CalPERS Board of Administration Member-At-Large Position B Election, for: _____

Name* (Type/Print) & Signature Last Four Digits of the Social Security Number* (Employed by/Retired from) (Agency Name)

278. _____
(Type/Print Name Clearly) **XXX – XX –** _____

(Signature) _____
(Employed by/Retired from) (Agency Name)

279. _____
(Type/Print Name Clearly) **XXX – XX –** _____

(Signature) _____
(Employed by/Retired from) (Agency Name)

280. _____
(Type/Print Name Clearly) **XXX – XX –** _____

(Signature) _____
(Employed by/Retired from) (Agency Name)

281. _____
(Type/Print Name Clearly) **XXX – XX –** _____

(Signature) _____
(Employed by/Retired from) (Agency Name)

282. _____
(Type/Print Name Clearly) **XXX – XX –** _____

(Signature) _____
(Employed by/Retired from) (Agency Name)

283. _____
(Type/Print Name Clearly) **XXX – XX –** _____

(Signature) _____
(Employed by/Retired from) (Agency Name)

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Nomination Petition 2025 CalPERS Board of Administration Member-At-Large Position B Election, for: _____

Name* (Type/Print) & Signature

Last Four Digits of the Social Security Number*

(Employed by/Retired from) (Agency Name)

284.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from) (Agency Name)

(Signature)

285.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from) (Agency Name)

(Signature)

286.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from) (Agency Name)

(Signature)

287.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from) (Agency Name)

(Signature)

288.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from) (Agency Name)

(Signature)

289.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from) (Agency Name)

(Signature)

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Name* (Type/Print) & Signature

Last Four Digits of the Social Security Number*

(Employed by/Retired from) (Agency Name)

290.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from) (Agency Name)

(Signature)

291.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from) (Agency Name)

(Signature)

292.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from) (Agency Name)

(Signature)

293.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from) (Agency Name)

(Signature)

294.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from) (Agency Name)

(Signature)

295.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from) (Agency Name)

(Signature)

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Name* (Type/Print) & Signature

Last Four Digits of the Social Security Number*

(Employed by/Retired from) (Agency Name)

296.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from) (Agency Name)

(Signature)

297.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from) (Agency Name)

(Signature)

298.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from) (Agency Name)

(Signature)

299.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from) (Agency Name)

(Signature)

300.

(Type/Print Name Clearly)

XXX – XX – _____

(Employed by/Retired from) (Agency Name)

(Signature)

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