



NOMINATION PAPERWORK FOR EIGHTH TRUSTEE POSITION

Sonoma County Employees' Retirement Association
433 Aviation Boulevard, Suite 100, Santa Rosa, CA 95403
Tel: (707) 565-8100 / Fax: (707) 565-8102
www.scretire.org

NOMINATION

The nomination period is from October 07 through October 21, 2020 at 5:00 p.m. No less than five but no more than ten signatures of qualified (retired membership) voters are required on the petition, which must be filed no later than 5:00 P.M. on October 21, 2020 at the SCERA Office, 433 Aviation Boulevard, Suite 100, Santa Rosa, CA.

In the event there is only one nominee, no election shall be held and the nominee shall be declared elected.

CANDIDATE'S STATEMENT

Candidates who wish to submit a statement of their qualifications for office should submit the attached statement form to SCERA for publication by 5:00 P.M. on October 21, 2020 (the last date to file nomination petitions). Candidate statements so submitted will be distributed with the official ballots. Statements will be printed exactly as written and will not be edited for spelling, punctuation, content, or grammatical issues. Please be sure to proofread your statement before submitting it.

NOMINATION PAPER FILING FORM
SCERA BOARD TRUSTEE, EIGHTH ALTERNATE TRUSTEE POSITION



Sonoma County Employees' Retirement Association
 433 Aviation Boulevard, Suite 100, Santa Rosa, CA 95403
 Tel: (707) 565-8100 / Fax: (707) 565-8102
 www.scretire.org

The Eighth Alternate Trustee Position Member must be a retired member who is elected by retired members of the Sonoma County Employees' Retirement Association (SCERA).

We, the undersigned retired members of the Sonoma County Employees' Retirement Association hereby nominate for the office of the Eighth Alternate Trustee Position of the Sonoma County Employees' Retirement Association Board with a term from January 1, 2021 to December 31, 2023.

SIGNATURE	PRINTED NAME	DEPARTMENT

DECLARATION OF CIRCULATOR
 State of California, County of Sonoma

I, _____, under penalty of perjury, declare: That I circulated the foregoing petition and saw all the signatures appended thereto and that to the best of my knowledge and belief that they are the signatures of the persons whose names they purport to be and that they are signatures of qualified voters. The signatures were obtained between October 07, 2020 and October 21, 2020.

Signature of Circulator *Department* *Date*

DECLARATION OF NOMINEE

I, _____, hereby declare that I am qualified to serve as the Nominee for the Office of Eighth Alternate Trustee of the Sonoma County Employees' Retirement Board and that I will accept the nomination and also accept the office in the event of my election. I declare under penalty of perjury that the foregoing is true and correct.

Signature of Nominee for Eighth Alt. Position *Department* *Date*

(Return completed form to SCERA)

CANDIDATE'S STATEMENT
SCERA BOARD TRUSTEE, EIGHTH ALTERNATE TRUSTEE POSITION



Sonoma County Employees' Retirement Association
433 Aviation Boulevard, Suite 100, Santa Rosa, CA 95403
Tel: (707) 565-8100 / Fax: (707) 565-8102
www.scretire.org

Name: _____

Occupation: _____

Education: _____

Qualifications for Board Membership
(Type or print in 250 words or less)

Candidate's Signature

Date

(Return completed form to SCERA)