



THE COMMONWEALTH OF MASSACHUSETTS

State Retirement Board

ONE Winter Street, 8th Floor, BOSTON, MA 02108

2025-26 BOARD ELECTION

NOMINATION FORMS FOR ELECTION TO STATE RETIREMENT BOARD MUST BE RECEIVED AT THE STATE RETIREMENT BOARD'S BOSTON OFFICE by 5:00 p.m. FRIDAY, SEPTEMBER 26, 2025.

Main Office: One Winter Street, 8th floor, Boston, MA 02108

We, the undersigned members of the State Employees' Retirement System hereby nominate:

Print Name of Nominee

MSERS Member ID number, or HRCMS ID number (if applicable), or the last four digits of Social Security Number.

Residence

A member or retiree of the Massachusetts State Employees' Retirement System (MSERS), as a member of the State Retirement Board for a term of three (3) years. *NOTE: Only members of MSERS are ELIGIBLE to sign this form.*

Signature

Name

MSERS Member ID number, or HRCMS ID number (if applicable), or the last four digits of Social Security Number.

Note: Only signatures submitted on nomination forms provided by the State Retirement Board to a candidate will be accepted. Signatures may be: (1) original ("wet signature") provided by an eligible MSERS member; or (2) a scanned original signature made by an eligible MSERS member submitted on an official nomination form; or (3) a signature made by an eligible MSERS member using a computer mouse or stylus and submitted on an official nomination form. Electronic signatures will not be accepted.

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THIS STATEMENT MUST BE SIGNED BY THE NOMINEE: "If qualified as a candidate I accept this nomination for the office to which it applies and instruct the Election Officer to print my name on the official ballot."

Signature

Dated

Main Office: One Winter Street, 8th Floor, Boston, MA 02108 Phone: 617-367-7770 Toll Free (within MA): 1-800-392-6014

mass.gov/retirement

Approved as amended on 7/31/2025