INSTRUCTIONS TO CANDIDATES

- Prior to circulating nomination papers: Read and certify eligibility by signing the Affidavit of Eligibility (Page 1)
- ➤ Print your name at the top of the Nomination Form (Page 2).
- Obtain a minimum of five (5) signatures and addresses of active and/or retired members of the Franklin Regional Retirement System supporting your nomination. For ease of verification of signatures, please make sure that signers clearly print their names and addresses.
- Complete the Affidavit of Acceptance of Nomination (Page 3).
- ➤ Submit all three pages to the offices of the Franklin Regional Retirement System, 101 Munson Street, Suite 108, Greenfield, MA 01301. Bring (<u>Page 4</u>) with you and have it signed by staff as receipt of your nomination paper(s).
- ➤ Return nominations no later than 2:00 p.m. on Friday, December 6, 2024 in the office of the Franklin Regional Retirement System, 101 Munson Street, Suite 108, Greenfield, Massachusetts. Late forms will not be accepted for any reason.
- ➤ The Election Board will certify nominations. If there are two or more qualified nominees, an election will be conducted by mail according to M.G.L. Chapter 34B Section 19, and 840 CMR 7.00.
- ➤ Nominee statements will not be included with ballots. Those who want to provide a statement to the electorate must do so at their own expense. Law prohibits the Franklin Regional Retirement System from releasing member and retiree names, addresses and telephone numbers. If a nominee wants the retirement office to send a statement to the electorate, the nominee must provide sealed envelopes including postage, with the statement inside, to the retirement office. The office will affix address labels and mail the envelopes. The retirement office will charge for labor and materials.

If you have questions regarding the election process, please contact the office of the Franklin Regional Retirement System at (413) 774-4837.

Affidavit of Eligibility

(Candidate's printed name)

NOMINATION OF ____

Page 1

Nomination Form

NOMINATION OF_	
(0	andidate's printed name)

We the undersigned, hereby state that we are qualified members/retirees of the Franklin Regional Retirement System, and in accordance with the provisions of Massachusetts General Laws Chapter 32, we hereby nominate the above named member as a candidate for an elected member to serve on the Franklin Regional Retirement Board for the remaining term expiring December 31, 2026.

Name (print clearly)	<u>Signature</u>	<u>Address</u>

Affidavit of Acceptance of Nomination

CMR 1.03, and that I accept the nomination	y that I am an active or retired member of the Franklin and and signed the affidavit on Page 1 pursuant to 840 in as a candidate for the position of an elected member of the remainder of the three year term expiring
Signature of candidate	Date
Address of candidate	
Phone number and/or email	
Name and title to be placed on Ballot:	Name
	Title
	Town/Unit

A minimum of five qualified signatures and addresses are required for valid nomination. Nomination papers must be filed in the Franklin Regional Retirement Office, 101 Munson Street, Suite 108, Greenfield, Massachusetts 01301 no later than 2:00 pm on Friday, December 6, 2024.

RECEIPT FOR FILING OF NOMINATION FOR CANDIDACY ELECTED MEMBER

F THE TERM OF JAN DECEMBER 31, 2026	UARY 1, 2024 THROUGH

Name of Candidate		
The above named person has submendidate for the election of a member to see tirement Board for the remainder of the December 31, 2026.	serve on the Franklin	Regional
Signature of Staff Member	Date of Filing	Time
Candidate/ Nominee: Please brin returning the completed Nominati		vhen

Franklin Regional Retirement System

Candidate Questionnaire and Contact Information

Election of Third Member to the Franklin Regional Retirement Board for the remainder of a three year term effective January 1, 2024 to December 31, 2026

Instructions:

The purpose of this form is to provide the voters with some basic information about you, (the candidate) and some ways to contact you if the voter has further questions. This form will be scanned as a static PDF on a special page on our website (FRRSMA.com). Your participation is optional, as is the detail of information you provide. However, if you chose not to fill out this form, a blank form with your name on it and the words "This candidate chose not to provide information." will be included on our website so the voters will not be confused if there is no form for you there.

The retirement system's Advisory Council serves as the election board, and it reserves the right to redact and/or return for edits, any offensive information on this form. Please keep your information on this form quickly informative, and reserve lengthier statements for your other media modes (website, phone conversation, email, etc.) separate from this outlet.

When you are done, please return the completed form to the retirement office with your other nomination paperwork.

Thank you.

Franklin Regional Retirement System

Candidate Questionnaire and Contact Information

Election of Third Member to the Franklin Regional Retirement Board for the remainder of a three year term effective January 1, 2024 to December 31, 2026

The following information has been provided to the voters in the above election as an aid. The retirement system – Advisory Council, Board, and staff are in no way endorsing this candidate by providing this service. The goal is to connect the voters to the candidates.

Name:
Address:
Phone (H): (W): (C):
Email:
Website:
Social media page:
Member or retiree?:
Work history or related experience:
Describe what you know about the role of a board member:
Explain your interest in serving as a member of the board: