

# ILLINOIS POLICE OFFICERS' PENSION INVESTMENT FUND

## STATEMENT OF CANDIDACY BENEFICIARY REPRESENTATIVE TRUSTEE

A Candidate for the Beneficiary Trustee position must complete this information form and return it to the Illinois Police Officers' Pension Investment Fund's (IPOPIF) mailing address or email address listed below. Please return the completed document at your earliest convenience, *and no later than 4:30 p.m. (Central Daylight Time) on August 28, 2020.*

This information will be used solely by IPOPIF to communicate with the Candidate during the nomination and election process.

### CANDIDATE INFORMATION BENEFICIARY REPRESENTATIVE TRUSTEE

\_\_\_\_\_  
First Name

\_\_\_\_\_  
Last Name

\_\_\_\_\_  
Name to be Printed on Ballot

\_\_\_\_\_  
Home or Work Street Address

\_\_\_\_\_  
Home or Work City/State/Zip Code

( \_\_\_\_\_ )

Home Phone Number

( \_\_\_\_\_ )

Mobile Phone Number

\_\_\_\_\_  
Email Address

\_\_\_\_\_  
Participating Article Pension Fund FROM WHICH I AM RECEIVING BENEFITS

**NOTE: Candidates must complete the information in its entirety and return the form to:**

Illinois Police Officers' Pension Investment Fund  
c/o Foster & Foster  
184 Shuman Boulevard, Suite 305  
Naperville, IL 60563

**OR:**

Email: [ILPOPIF@gmail.com](mailto:ILPOPIF@gmail.com)

Subject Line: Beneficiary Statement of Candidacy – INSERT FULL NAME

## BALLOT DESIGNATION

The candidate may submit a *short ballot designation* that will be printed on the official ballot along with the candidate's name.

- Such designation shall be limited to the candidate's title, office, employment classification or similar position held by the candidate.
- This designation shall not be more than forty (40) characters in length, including spaces. If the ballot designation submitted by the candidate exceeds the foregoing space limitation, no ballot designation shall be printed for that candidate.

ENTER BALLOT DESIGNATION BELOW:

**By signing below, I hereby certify that the preceding information and statements are true. I acknowledge that I have received, reviewed, and understand the IPOPIF Election Policy (Rules) and completed the Nomination Petitions as required by the Rules in order to be eligible for the Election Ballot.**

Today's Date: \_\_\_\_\_ Signature: \_\_\_\_\_