STATEMENT OF INTEREST

Name	Address, Zip Code	Office	S.S. Number
		CONTRIBUTING TRUSTEE	xxx-xx-

State of _____)
) SS.
County of _____)

I, _____ , being first duly sworn (or affirmed), say that I reside at _____ Street, in the _____ (city or village) of _____ , Zip Code _____ in the county of _____, State of Illinois. I am an SERS active member, with at least eight years of service and eligible to serve as an Active Member Trustee in the term ending July 14, 2016. I hereby request that my name be considered by the Executive Secretary and SERS Board of Trustees.

_____
Signature

Subscribed and sworn (or affirmed) to before me by _____ , who is to me known, this _____ day of _____ 20_____ .

(SEAL)

_____
NOTARY PUBLIC

My commission expires: _____