

**NOMINATION APPLICATION
AS TRUSTEE
GENERAL SCHEDULE SUPPLEMENTAL PENSION PLAN**

I wish to be considered as a candidate for nomination to the Board of Trustees of the General Schedule Supplemental Pension Plan.

As a Trustee, I will be placed in a position of trust and confidence;

I understand that the position of Trustee is for a two (2) year term, my services are completely voluntary, and I will not receive any compensation for my service nor reimbursement for any expenses I incur;

I understand that I will have to attend regular meetings; that I will be expected to demonstrate a familiarity and understanding of the purpose and operations of the Plan documents and Trust Agreement for the General Schedule Supplemental Pension Plan; and

I understand that I will be expected to perform the functions of a Trustee to the highest ethical and fiduciary standards and will sign an Acceptance of Trustee Appointment Form.

On the next page, I have described my qualifications.

Name, Printed

Occupation

Daytime Phone

Home Address

Signature

Date

**BIOGRAPHICAL DATA OR STATEMENTS
PROVIDED BY CANDIDATES FOR TRUSTEE**

If your name is placed on the ballot, it may be accompanied with biographical data, personal background or a statement by you explaining any experience, skills, training or education that will be useful as a Trustee. Please write, in less than 150 words, any information that you wish to be published:
