

MEMORANDUM

TO:

Participating Employers

FROM:

Maris E. LeBlanc, Executive Director

RE:

MERS BOARD OF TRUSTEES ELECTION

DATE:

May 1, 2024 - AMENDED MAY 3, 2024

Three seats on the MERS Board of Trustees are open for election. The seat for a **non-elected official** is for a full six-year term. One **elected official** seat is for a five-year partial term. One **elected official** seat is for a four-year partial term.

Any actively contributing **non-elected official** of a participating municipality/employer who will have credit in the system for at least six (6) years of service on May 22, 2024, is eligible to run for this full six-year term on the Board.

Any actively contributing **elected official** of a participating municipality/employer who will have credit in the system for at least six (6) years of service on May 22, 2024, is eligible to run for either of partial terms on the Board. An elected official may continue to hold an elected official trustee seat only while remaining in office.

Candidates for election to the Board must be nominated by a petition with signatures of at least 25 active members of the system.

A Nomination Petition is enclosed; please make additional copies as necessary. To be valid, each petition must be completed **in full** and must be received in the retirement system office **no later than 4:00 p.m. on May 22, 2024**. The candidate information form, with education, positions held, and reasons for seeking the trustee position, and the signed memorandum of responsibility for board members must be attached to the nomination petition. Persons not meeting the qualifications to run will be disqualified.

The ballot will list each qualified candidate, in alphabetical order. Details from the candidate information form will be included in the ballot mailout.

MERS will not provide mailing addresses of members to candidates. A list of the participating employers in MERS is available on the MERS website, mersla.com.

If only one person qualifies for an open seat that person will be elected without opposition. If more than one candidate qualifies for a seat, an election will be conducted. The candidate who receives the majority of valid votes will be declared the winner of the election. If there are more than two candidates and no candidate receives a majority, a run-off will be held between the two candidates receiving the highest vote count.

Memorandum of Responsibility for Board Member

From: Maris E. LeBlanc, Executive Director
To: Candidate for Board of Trustees

Date: May 1, 2024

Thank you for your offer to participate in the governance of your retirement system. The Municipal Employees' Retirement System of Louisiana (MERS) was established in 1955 by the legislature and the governing authority was placed in the Board of Trustees.

- As a member of the Board, you will be responsible for setting the policies of the system for all members and be responsible for the proper investment of the system's \$1 billion portfolio.
- Each member of the Board is a fiduciary (R.S. 11:261) and as such you are bound by the "Prudent Man Rule", which means you, as a Board Member, are required "... to act with the care, skill, prudence, and diligence under the circumstances prevailing that a prudent institutional investor acting in a like capacity and familiar with such matters would use in the conduct of an enterprise of a like character and with like aims." (R.S. 11:263) "A fiduciary must discharge his duties within the law solely in the interest of system members and beneficiaries for the exclusive purpose of providing benefits to participants and beneficiaries and paying the expenses of administering the plan." (R.S. 11:264.4)
- The Board of Trustees for MERS typically meets in Baton Rouge. A schedule of the 2024 meetings is attached. The meetings start at 9:00 a.m. and continue until all business is completed. In addition, each Board member attends the LA Association of Public Employees Retirement Systems (LAPERS) conference held in New Orleans during the month of September from Sunday to Tuesday annually. Board members are expected to attend meetings.
- According to R.S. 11:185, each member of the Board of Trustees shall annually attend at least eight (8) hours of investment training, four (4) hours of actuarial science information education, two (2) hours of education regarding the laws, rules, and regulations applicable to his/her system, and two (2) hours of instruction on fiduciary duty and ethics.
- Board members have an awesome responsibility, which at times can become time consuming, and for their time and trouble, the legislature authorizes the system to pay them \$75 per day, plus expenses.

I have rea	ad and	understand	the	responsibilities	of a	Trustee	for the	Municipal	Employees'	Retirement
System of	Louisi	ana.								

Signature	Date

MUNICIPAL EMPLOYEES' RETIREMENT SYSTEM OF LOUISIANA CANDIDATE INFORMATION

NAME:
ADDRESS:
CONTACT INFORMATION
OFFICE:
HOME:
CELL:
EMAIL:
THE FOLLOWING WILL BE PUBLISHED WITH THE ELECTION BALLOT EDUCATION:
POSITIONS HELD:
REASON(S) FOR SEEKING TRUSTEE POSITION:

An electronic version of this form may be requested by calling our office at 225-925-4810 or 800-820-1137.

MERS 2024 Board Meeting Dates

Meetings will begin at 9:00 a.m. unless otherwise stated.

January 25, 2024 (Canceled)

March 21, 2024*

April 18, 2024

May 16, 2024

June 20, 2024*

August 15, 2024*

October 17, 2024

December 12, 2024*

*=Meketa Attending Meeting

LAPERS Conference September 8-10, New Orleans

MUNICIPAL EMPLOYEES' RETIREMENT SYSTEM OF LOUISIANA

NOMINATION PETITION

for an

Elected Official

IN ORDER TO BE VALID, THIS NOMINATION PETITION MUST BE SIGNED BY AT LEAST TWENTY-FIVE (25) ACTIVE MEMBERS OF THE MUNICIPAL EMPLOYEES' RETIREMENT SYSTEM (MERS) AND RECEIVED IN THE RETIREMENT SYSTEM OFFICE BY 4:00 P.M. ON May 22, 2024.

An elected official who is actively contributing to MERS and has at least six (6) years of service credit is eligible to be nominated to run for election to the Board of Trustees.

The undersigned twenty-five active members of MERS, hereby place in nomination for election

to the Board of Trustees of th	e Retirement System the following	g :
Name (Printed or Typed)		
SSN (last 4 digits)		
Municipality/Employer		·
Position		
Email Address	•	
Mailing Address		
City, State, and Zip		
Area Code and Phone No.		
Please check one:		
I am seeking	four-year partial term five-year partial term	
Return Completed Petition	to: MERS	

7937 Office Park Blvd Baton Rouge, LA 70809

1.	Member's name (Printed or typed)		
	Member's SSN (last 4 digits)		
	Member's employer		
	Member's signature		
2.	Member's name (Printed or typed)		
	Member's SSN (last 4 digits)		
	Member's employer		
	Member's signature		
3.	Member's name (Printed or typed)		
	Member's SSN (last 4 digits)		
	Member's employer		
	Member's signature		
4.	Member's name (Printed or typed)		
	Member's SSN (last 4 digits)		
	Member's employer		
	Member's signature		
5.	Member's name (Printed or typed)		
	Member's SSN (last 4 digits)		
	Member's employer		
	Member's signature		

6.	Member's name (Printed or typed)	
	Member's SSN (last 4 digits)	
	Member's employer	
	Member's signature	
7.	Member's name (Printed or typed)	
	Member's SSN (last 4 digits)	
	Member's employer	
	Member's signature	
8.	Member's name (Printed or typed)	
	Member's SSN (last 4 digits)	
	Member's employer	
	Member's signature	
9.	Member's name (Printed or typed)	
	Member's SSN (last 4 digits)	
	Member's employer	
	Member's signature	
10.	Member's name (Printed or typed)	
	Member's SSN (last 4 digits)	
	Member's employer	
	Member's signature	

•

11. Member's name (Printed or typed)	
Member's SSN (last 4 digits)	
Member's employer	
Member's signature	
12. Member's name (Printed or typed)	
Member's SSN (last 4 digits)	
Member's employer	
Member's signature	
13. Member's name (Printed or typed)	
Member's SSN (last 4 digits)	
Member's employer	
Member's signature	
14. Member's name (Printed or typed)	
Member's SSN (last 4 digits)	
Member's employer	
Member's signature	
15. Member's name (Printed or typed)	
Member's SSN (last 4 digits)	
Member's employer	
Member's signature	

,

16. Member's name (Printed or typed)	
Member's SSN (last 4 digits)	
Member's employer	
Member's signature	
17. Member's name (Printed or typed)	
Member's SSN (last 4 digits)	······································
Member's employer	
Member's signature	
18. Member's name (Printed or typed)	
Member's SSN (last 4 digits)	
Member's employer	<u></u>
Member's signature	
19. Member's name (Printed or typed)	
Member's SSN (last 4 digits)	
Member's employer	
Member's signature	
20. Member's name (Printed or typed)	
Member's SSN (last 4 digits)	
Member's employer	
Member's signature	

•

21. Member's name (Printed or typed)	
Member's SSN (last 4 digits)	·····
Member's employer	
Member's signature	
22. Member's name (Printed or typed)	
Member's SSN (last 4 digits)	
Member's employer	
Member's signature	
23. Member's name (Printed or typed)	
Member's SSN (last 4 digits)	
Member's employer	
Member's signature	
24. Member's name (Printed or typed)	
Member's SSN (last 4 digits)	
Member's employer	
Member's signature	
25. Member's name (Printed or typed)	
Member's SSN (last 4 digits)	
Member's employer	
Member's signature	

MUNICIPAL EMPLOYEES' RETIREMENT SYSTEM OF LOUISIANA

NOMINATION PETITION

for a

Non-Elected Official

IN ORDER TO BE VALID, THIS NOMINATION PETITION MUST BE SIGNED BY AT LEAST TWENTY-FIVE (25) ACTIVE MEMBERS OF THE MUNICIPAL EMPLOYEES' RETIREMENT SYSTEM (MERS) AND RECEIVED IN THE RETIREMENT SYSTEM OFFICE BY 4:00 P.M. ON May 22, 2024.

A non-elected official who is actively contributing to MERS and has at least six (6) years of service credit is eligible to be nominated to run for election to the Board of Trustees.

The undersigned twenty-five active members of MERS, hereby place in nomination for election

to the Board of Trustees of the	he Retirement System the following:
Name (Printed or Typed)	
SSN (last 4 digits)	
Municipality/Employer	
Position	
Email Address	
Mailing Address	
City, State, and Zip	
Area Code and Phone No.	

Return Completed Petition to: MERS

7937 Office Park Blvd Baton Rouge, LA 70809

1.	Member's name (Printed or typed)	
	Member's SSN (last 4 digits)	
	Member's employer	
	Member's signature	
2.	Member's name (Printed or typed)	
	Member's SSN (last 4 digits)	
	Member's employer	
	Member's signature	
3.	Member's name (Printed or typed)	
	Member's SSN (last 4 digits)	
	Member's employer	
	Member's signature	
	M. 1. 1. (Division in the control of	
4.	Member's name (Printed or typed)	
	Member's SSN (last 4 digits)	
	Member's employer	
	Member's signature	
_		
5.	Member's name (Printed or typed)	
	Member's SSN (last 4 digits)	
	Member's employer	
	Member's signature	

,

6.	Member's name (Printed or typed)	
	Member's SSN (last 4 digits)	
	Member's employer	
	Member's signature	
7.	Member's name (Printed or typed)	
	Member's SSN (last 4 digits)	
	Member's employer	
	Member's signature	
8.	Member's name (Printed or typed)	
	Member's SSN (last 4 digits)	
	Member's employer	
	Member's signature	
9.	Member's name (Printed or typed)	
	Member's SSN (last 4 digits)	
	Member's employer	
	Member's signature	
10.	Member's name (Printed or typed)	
	Member's SSN (last 4 digits)	
	Member's employer	
	Member's signature	

11. Member's name (Printed or typed)	
Member's SSN (last 4 digits)	
Member's employer	
Member's signature	
12. Member's name (Printed or typed)	
Member's SSN (last 4 digits)	
Member's employer	
Member's signature	
13. Member's name (Printed or typed)	
Member's SSN (last 4 digits)	
Member's employer	
Member's signature	
14. Member's name (Printed or typed)	
Member's SSN (last 4 digits)	
Member's employer	
Member's signature	
15. Member's name (Printed or typed)	
Member's SSN (last 4 digits)	
Member's employer	
Member's signature	

16. Member's name (Printed or typed)	
Member's SSN (last 4 digits)	
Member's employer	
Member's signature	
17. Member's name (Printed or typed)	
Member's SSN (last 4 digits)	
Member's employer	
Member's signature	
18. Member's name (Printed or typed)	
Member's SSN (last 4 digits)	
Member's employer	
Member's signature	
19. Member's name (Printed or typed)	
Member's SSN (last 4 digits)	
Member's employer	
Member's signature	
20. Member's name (Printed or typed)	
Member's SSN (last 4 digits)	
Member's employer	
Member's signature	

21. Member's name (Printed or typed)	
Member's SSN (last 4 digits)	
Member's employer	
Member's signature	
22. Member's name (Printed or typed)	
Member's SSN (last 4 digits)	
Member's employer	
Member's signature	
23. Member's name (Printed or typed)	
Member's SSN (last 4 digits)	·
Member's employer	
Member's signature	
24. Member's name (Printed or typed)	
Member's SSN (last 4 digits)	
Member's employer	
Member's signature	
25. Member's name (Printed or typed)	•
Member's SSN (last 4 digits)	
Member's employer	
Member's signature	•

•