Municipal Employees' Retirement System of Michigan 1134 Municipal Way . Lansing, MI 48917 800.767.MERS (6377) • Fax: 517.703.9707 www.mersofmich.com

# 2017 Officer and Employee Delegate Certification Form

MERS 71st Annual Conference | September 21-22, 2017 | Detroit Marriott at the Renaissance Center

Please print clearly . Retain a copy for your records

IMPORTANT: A voting delegate registered to attend the MERS Annual Conference is NOT confirmed to have voting rights until this form has been received by MERS.

The voting delegate representative must be a MERS member, defined as an active employee on payroll who is enrolled in either a MERS Defined Benefit Plan, Defined Contribution Plan or Hybrid Plan.

If you are NOT attending MERS Annual Conference, you do not need to submit this form.

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The officer delegate (or alternate) shall be a MERS member who holds a department head position or above, exercises management responsibilities, and is directly responsible to the legislative, executive, or judicial branch of government.

Officer Delegate name

Ginger Terpstra

Officer Alternate name

#### Christine Mossner

Officer delegate and alternate listed above were appointed to serve at the 2017 MERS Annual Conference by official action of the governing body (or chief judge for a participating court) on August 14 \_, 2017.

## 2. Employee (and alternate) delegate information

The employee delegate (or alternate) shall be an employee member who is not responsible for management decisions, receives direction from management and, in general, is not directly responsible to the legislative, executive, or judicial branch of government.

Employee Delegate name

Chris Miller

Employee Alternate name

## Jim Saldana

Employee delegate and alternate listed above were elected to serve at the 2017 MERS Annual Conference by secret ballot election conducted by an authorized officer on July 14 , 2017.

#### 3. Certification

NOTE: Certification should be signed by a member of the governing body or chief administrative officer, or the chief judge for a participating court.

I certify that the officer delegate and alternate selections are true and correct, and the secret ballot election results for the employee delegate and alternate are true and correct.

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Employer/municipality name* City of Charlotte	Municipality number* 2301		Email address gterpstra@charlottemi.org			
5		giorpsu				
Employer address	Employer city		Employer state	Employer zip code		
111 E. Lawrence Ave.	Charlotte	Charlotte		48813		
Signature of authorized authority*	Printed name					
	Ginger Terpstr	rpstra				
Title of authorized authority*		Date				
City Clerk			08/14/2017			



TIP: Scan and upload this completed form to your

<sup>\*</sup> Required field