



Illinois Municipal Retirement Fund

Suite 500 2211 York Road Oak Brook IL 60523-2337
Service Representatives 1-800-ASK-IMRF (1-800-275-4673)
www.imrf.org

EXECUTIVE TRUSTEE ELECTION BIOGRAPHICAL INFORMATION

Please return to IMRF by 4:30 P.M., Monday, September 16, 2002

Name _____ Date _____

_____ Business Address _____ Phone _____

_____ Home Address _____ Phone _____

Present Position
Job Title _____

Employer _____

Length of service
in this position _____ with this employer _____
from to from to

Current job duties (Please include total number of persons supervised, and name and title of officer to whom you report. Not more than 80 words. Attach an additional sheet, if necessary.)

Previous IMRF positions
Job Title _____ Employer _____

Length of service
in this position _____ with this employer _____
from to from to

Job Title _____ Employer _____

Length of service
in this position _____ with this employer _____
from to from to

Job Title _____ Employer _____

Length of service
in this position _____ with this employer _____
from to from to

Other pertinent information (Other experience, training or qualifications supporting your candidacy; and/or any goals, objectives or views you would endorse or pursue as a trustee. Not more than 50 words. Attach an additional sheet, if necessary.)