



Survey of Candidates for Retiree Representative on the PERS Board of Trustees

The Mississippi Retired Public Employees’ Association (MRPEA) represents approximately 155,000 active members and more than 100,000 retirees and beneficiaries of the Public Employees’ Retirement System of Mississippi (PERS). As a candidate for the Retiree Representative on the PERS Board of Trustees, we are providing you with an opportunity to respond to this brief survey. Please scan your signed and completed survey to the attention of Becky Cade at cade.consulting@att.net. If you prefer to fax, please fax it to 601-510-9259. **MRPEA may distribute the responses to this survey to its members and other interested parties without restriction.**

With the creation of PERS in 1952, the Mississippi Legislature made a promise to its public service employees to provide them with basic financial retirement protection for life. In exchange, employees were mandated to pay into PERS in good faith with the expectation that the State would meet its promise to help fund those benefits.

Please circle your response(s) to each question:

1. Do you philosophically support defined benefit plans?

Yes No

2. If elected to the PERS Board of Trustees, will you support the State maintaining the current retirement system benefits including the Cost-of-Living Adjustment (COLA)?

Yes No

3. Do you believe that benefits should ever be reduced for:

Existing retirees?	Yes	No
Current employees?	Yes	No
Future employees?	Yes	No

4. As a member of the PERS Board of Trustees, will you support adjusting employer contribution rates in accordance with the recommendation of the actuary and state law should that become necessary in the future to maintain the fiscal solvency of the system?

Yes No

5. Do you support maintaining the existing structure of the PERS Board of Trustees?

Yes No

Please offer any additional comments below:

Thank you for your interest in PERS and MRPEA and the dedicated Mississippi public servants that it represents. Please print and sign your name in the space provided.

Name	Signature	Date
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