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APPEARANCES

BOARD MEMBERS:

DANIEL FORTUNA, President and
Annuitant Trustee

ROBERT TEBBENS, Active Trustee

WILLIAM MURPHY, Secretary and Active Trustee

TIMOTHY McPHILLIPS, Active Trustee

MELISSA CONYEARS-ERVIN, City Treasurer

ANNA VALENCIA, City Clerk

RESHMA SONI, City Comptroller

MARY SHERIDAN, Active Trustee

ATTORNEYS FOR THE BOARD:

BURKE, BURNS AND PINELLI, LTD.

BY: MS. MARY PATRICIA BURNS

MR. VINCENT PINELLI

ALSO PRESENT:

KELLY WELLER, Executive Director

LORI LUND, Deputy Executive Director

LORNA SCOTT, Chief Investment Officer

JACLYN VLAHOS, Comptroller

JOHN CONNESS, Fund Accountant

MARK MYSLINSKI, City Treasurer's Office

MICHAEL I. PETERS, M.D., Board Physician

1 people who would like to speak, they need to hit
2 star 6 to be unmuted. We will wait another second
3 or two.

4 CHAIRMAN FORTUNA: Hearing none, we will
5 move on.

6 MEMBER MURPHY: Thank you, Mr. President.

7 First I am going to turn to the approval
8 of Administrative Items. Approval of the Minutes.
9 Regular audio meetings of September 15, 2021, open
10 and closed minutes. Regular audio meeting
11 transcript September 15, 2021. The Executive
12 Director Search Committee audio meeting and
13 transcript April 8, 2021, open and closed minutes.

14 I would like to make a motion to approve
15 the open minutes, the audio transcript, and the
16 closed session minutes for the September 15, 2021
17 board meeting and the April 8, 2021 Executive
18 Director Search Committee meeting.

19 CHAIRMAN FORTUNA: Before we take that
20 into consideration, we are going to have a quick
21 roll call. I know people have not called in or I
22 don't see some of our Trustees on video. Let's
23 just quickly run through the attendance here.

24 MS. BURNS: Trustee Valencia.

1 MEMBER VALENCIA: Here.

2 MS. BURNS: Trustee Tebbens.

3 MEMBER TEBBENS: Here.

4 MS. BURNS: Trustee Sheridan.

5 TRUSTEE SHERIDAN: I am here.

6 MS. BURNS: Trustee Soni.

7 Trustee Conyears-Ervin.

8 MEMBER CONYEARS-ERVIN: Here.

9 MS. BURNS: Trustee McPhillips.

10 MEMBER MCPHILLIPS: Here.

11 MS. BURNS: Trustee Murphy.

12 MEMBER MURPHY: Here.

13 MS. BURNS: Trustee Fortuna.

14 CHAIRMAN FORTUNA: Here.

15 MS. BURNS: Sir, you have a quorum.

16 CHAIRMAN FORTUNA: Secretary Murphy,
17 please, go ahead.

18 MS. BURNS: You had a motion on the table
19 for the minutes.

20 CHAIRMAN FORTUNA: There is a motion. Is
21 there a second?

22 MEMBER VALENCIA: Second.

23 CHAIRMAN FORTUNA: There is a motion by
24 Trustee Murphy. Seconded by Trustee Valencia.

1 Trustee Murphy.

2 MEMBER MURPHY: Yes.

3 CHAIRMAN FORTUNA: Trustee Sheridan.

4 MEMBER SHERIDAN: Yes.

5 CHAIRMAN FORTUNA: Trustee

6 Conyears-Ervin.

7 MEMBER CONYEARS-ERVIN: Yes.

8 CHAIRMAN FORTUNA: Trustee McPhillips.

9 MEMBER MCPHILLIPS: Yes.

10 CHAIRMAN FORTUNA: Trustee Tebbens.

11 MEMBER TEBBENS: Yes.

12 CHAIRMAN FORTUNA: Trustee Valencia.

13 MEMBER VALENCIA: Yes.

14 CHAIRMAN FORTUNA: And I am a yes.

15 Motion carries.

16 MEMBER MURPHY: The next item on the
17 agenda is the semi-annual review of the closed
18 session minutes as required by Section 2.06 of the
19 Open Meetings Act.

20 Based on the recommendations of Fund
21 counsel, I make a motion to keep open the closed
22 minutes and keep the remainder of the closed
23 minutes closed, as set forth in the memo to the
24 Board from counsel dated October 20, 2021.

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MEMBER SHERIDAN: Second.

CHAIRMAN FORTUNA: There is a motion by
Trustee Murphy. Seconded by Trustee Sheridan.
Trustee Murphy.

MEMBER MURPHY: Yes.

CHAIRMAN FORTUNA: Trustee Sheridan.

MEMBER SHERIDAN: Yes.

CHAIRMAN FORTUNA: Trustee
Conyears-Ervin.

MEMBER CONYEARS-ERVIN: Yes.

CHAIRMAN FORTUNA: Trustee McPhillips.

MEMBER MCPHILLIPS: Yes.

CHAIRMAN FORTUNA: Trustee Tebbens.

MEMBER TEBBENS: Yes.

CHAIRMAN FORTUNA: Trustee Valencia.

MEMBER VALENCIA: Yes.

CHAIRMAN FORTUNA: And I am a yes.

Motion carries.

MEMBER MURPHY: Moving on to B, I'd like
to make a motion to approve the Minimum Formula
Annuities starting with Member 15550 and ending
with Member 11788.

MEMBER CONYEARS-ERVIN: Second.

1 CHAIRMAN FORTUNA: There is a motion by
2 Trustee Murphy. Seconded by Trustee
3 Conyears-Ervin.

4 Trustee Murphy.

5 MEMBER MURPHY: Yes.

6 CHAIRMAN FORTUNA: Trustee Sheridan.

7 MEMBER SHERIDAN: Yes.

8 CHAIRMAN FORTUNA: Trustee
9 Conyears-Ervin.

10 MEMBER CONYEARS-ERVIN: Yes.

11 CHAIRMAN FORTUNA: Trustee McPhillips.

12 MEMBER MCPHILLIPS: Yes.

13 CHAIRMAN FORTUNA: Trustee Tebbens.

14 MEMBER TEBBENS: Yes.

15 CHAIRMAN FORTUNA: Trustee Valencia.

16 MEMBER VALENCIA: Yes.

17 CHAIRMAN FORTUNA: And I am a yes.

18 Motion carries.

19 MEMBER MURPHY: Moving on to C, I'd like
20 to approve the Widow Annuities starting with Member
21 10079 through Member 09399.

22 MEMBER TEBBENS: Second.

23 CHAIRMAN FORTUNA: There is a motion by
24 Trustee Murphy. Seconded by Trustee Tebbens.

1 Trustee Murphy.

2 MEMBER MURPHY: Yes.

3 CHAIRMAN FORTUNA: Trustee Sheridan.

4 MEMBER SHERIDAN: Yes.

5 CHAIRMAN FORTUNA: Trustee

6 Conyears-Ervin.

7 MEMBER CONYEARS-ERVIN: Yes.

8 CHAIRMAN FORTUNA: Trustee McPhillips.

9 MEMBER MCPHILLIPS: Yes.

10 CHAIRMAN FORTUNA: Trustee Tebbens.

11 MEMBER TEBBENS: Yes.

12 CHAIRMAN FORTUNA: Trustee Valencia.

13 MEMBER VALENCIA: Yes.

14 CHAIRMAN FORTUNA: And I am a yes.

15 Motion carries.

16 MEMBER MURPHY: Moving on to D, Refunds
17 of Contribution. I would like to make a motion to
18 approve Refunds starting with Member 14191 through
19 Member 20114.

20 MEMBER VALENCIA: Second.

21 CHAIRMAN FORTUNA: There is a motion by
22 Trustee Murphy. Seconded by Trustee Valencia.

23 Trustee Murphy.

24 MEMBER MURPHY: Yes.

1 CHAIRMAN FORTUNA: Trustee Sheridan.
2 MEMBER SHERIDAN: Yes.
3 CHAIRMAN FORTUNA: Trustee
4 Conyears-Ervin.
5 MEMBER CONYEARS-ERVIN: Yes.
6 CHAIRMAN FORTUNA: Trustee McPhillips.
7 MEMBER MCPHILLIPS: Yes.
8 CHAIRMAN FORTUNA: Trustee Tebbens.
9 MEMBER TEBBENS: Yes.
10 CHAIRMAN FORTUNA: Trustee Valencia.
11 MEMBER VALENCIA: Yes.
12 CHAIRMAN FORTUNA: And I am a yes.
13 Motion carries.
14 MEMBER MURPHY: Item E, Death Benefits.
15 I would like to make a motion to approve the Death
16 Benefits for Member 100079 through Member 12033.
17 MEMBER MCPHILLIPS: Second.
18 CHAIRMAN FORTUNA: There is a motion by
19 Trustee Murphy. Seconded by Trustee McPhillips.
20 Trustee Murphy.
21 MEMBER MURPHY: Yes.
22 CHAIRMAN FORTUNA: Trustee Sheridan.
23 MEMBER SHERIDAN: Yes.
24 CHAIRMAN FORTUNA: Trustee

1 Conyears-Ervin.

2 MEMBER CONYEARS-ERVIN: Yes.

3 CHAIRMAN FORTUNA: Trustee McPhillips.

4 MEMBER MCPHILLIPS: Yes.

5 CHAIRMAN FORTUNA: Trustee Tebbens.

6 MEMBER TEBBENS: Yes.

7 CHAIRMAN FORTUNA: Trustee Valencia.

8 MEMBER VALENCIA: Yes.

9 CHAIRMAN FORTUNA: And I am a yes.

10 Motion carries.

11 MEMBER MURPHY: Under F, Partial

12 Payments. I would like to make a motion to approve

13 the Partial Payments beginning with Member 10079

14 and continuing through Member 06622.

15 MEMBER MCPHILLIPS: Second.

16 CHAIRMAN FORTUNA: There is a motion by

17 Trustee Murphy. Seconded by Trustee McPhillips.

18 Trustee Murphy.

19 MEMBER MURPHY: Yes.

20 CHAIRMAN FORTUNA: Trustee Sheridan.

21 MEMBER SHERIDAN: Yes.

22 CHAIRMAN FORTUNA: Trustee

23 Conyears-Ervin.

24 MEMBER CONYEARS-ERVIN: Yes.

1 CHAIRMAN FORTUNA: Trustee McPhillips.
2 MEMBER MCPHILLIPS: Yes.
3 CHAIRMAN FORTUNA: Trustee Tebbens.
4 MEMBER TEBBENS: Yes.
5 CHAIRMAN FORTUNA: Trustee Valencia.
6 MEMBER VALENCIA: Yes.
7 CHAIRMAN FORTUNA: And I am a yes.
8 Motion carries.
9 MEMBER MURPHY: Under G, there are no
10 Benefit Recalculations this month.
11 Under H, there are no Requests For
12 Permission this month.
13 Moving to I, Removals. I'd like to make
14 a motion to approve the Removals starting with
15 Kevin Barry and ending with Nicholas Inguanti.
16 MEMBER SHERIDAN: Second.
17 CHAIRMAN FORTUNA: Motion by Trustee
18 Murphy. Seconded by Trustee Sheridan.
19 Trustee Murphy.
20 MEMBER MURPHY: Yes.
21 CHAIRMAN FORTUNA: Trustee Sheridan.
22 MEMBER SHERIDAN: Yes.
23 CHAIRMAN FORTUNA: Trustee
24 Conyears-Ervin.

1 MEMBER CONYEARS-ERVIN: Yes.

2 CHAIRMAN FORTUNA: Trustee McPhillips.

3 MEMBER MCPHILLIPS: Yes.

4 CHAIRMAN FORTUNA: Trustee Tebbens.

5 MEMBER TEBBENS: Yes.

6 CHAIRMAN FORTUNA: Trustee Valencia.

7 MEMBER VALENCIA: Yes.

8 CHAIRMAN FORTUNA: And I am a yes.

9 Motion carries.

10 MEMBER MURPHY: Moving on to Section 3,
11 the Administrative and Court Orders. I'd like to
12 move that the Administrative and Court Orders
13 listed in the docket for Members 011126, 011335 and
14 014191 be approved, based on staff's representation
15 that the required paperwork is in order.

16 MEMBER CONYEARS-ERVIN: Second.

17 CHAIRMAN FORTUNA: There is a motion by
18 Trustee Murphy. Seconded by Trustee
19 Conyears-Ervin.

20 Trustee Murphy.

21 MEMBER MURPHY: Yes.

22 CHAIRMAN FORTUNA: Trustee Sheridan.

23 MEMBER SHERIDAN: Yes.

24 CHAIRMAN FORTUNA: Trustee

1 Conyears-Ervin.

2 MEMBER CONYEARS-ERVIN: Yes.

3 CHAIRMAN FORTUNA: Trustee McPhillips.

4 MEMBER MCPHILLIPS: Yes.

5 CHAIRMAN FORTUNA: Trustee Tebbens.

6 MEMBER TEBBENS: Yes.

7 CHAIRMAN FORTUNA: Trustee Valencia.

8 MEMBER VALENCIA: Yes.

9 CHAIRMAN FORTUNA: And I am a yes.

10 Motion carries.

11 MEMBER MURPHY: Moving on to disability
12 applications. Our first application, we have
13 Firefighter Tuggle.

14 MR. PINELLI: Mr. Tuggle, are you on the
15 line?

16 MR. TUGGLE: Yes. Present.

17 MR. PINELLI: You can hear us and we can
18 hear you, correct?

19 MR. TUGGLE: Correct.

20 MR. PINELLI: Let the record reflect this
21 is the hearing on the application for the Line of
22 Duty Disability benefit being made by Firefighter
23 Johnny Tuggle.

24 Good morning, Mr. Tuggle. As you have

1 been told, I am one of the attorneys for the
2 Pension Fund. I will be conducting this hearing
3 for the record.

4 I'd like to advise you of some
5 preliminary matters before we start the evidence on
6 your application.

7 First of all, there is a quorum of
8 members of the retirement board present, that is at
9 least five members. From the roll call it sounds
10 like there is currently seven members on the line
11 at this time.

12 If you don't know you should know, you
13 need the yes vote or affirmative vote of at least
14 five of the those Trustees in order to receive this
15 benefit per the Pension Code. Do you understand
16 that?

17 MR. TUGGLE: Yes.

18 MR. PINELLI: I also see from the record
19 that you do not have an attorney that filed an
20 appearance on your behalf. Is it your desire to
21 proceed with this hearing without an attorney?

22 MR. TUGGLE: Yes.

23 MR. PINELLI: Lastly, if you don't know
24 you should know that it is the applicant's burden

1 of proof to present sufficient evidence to the
2 Board in order for the Board to grant the benefit
3 that the applicant is seeking. Do you understand
4 as the applicant it is your burden of proof to
5 present sufficient evidence to the Board?

6 MR. TUGGLE: Yes.

7 MR. PINELLI: By way of procedures, I am
8 going to start by asking you some questions under
9 oath. The Board Members may or may not have
10 questions of you. Then I will call some other
11 witnesses to testify, including the Board's
12 physician consultant, Dr. Peters, as well as
13 another member of the Fire Department that I
14 believe is also present.

15 If there is anything I don't ask those
16 witnesses in my questions that you think is
17 important for the Board to know, please let me know
18 and you would be given that opportunity to ask them
19 any additional questions. Do you understand the
20 procedures?

21 MR. TUGGLE: Yes. Let me make that
22 clear, you said if I need to ask any questions that
23 wasn't asked at that time I would say I have
24 something to say?

1 MR. PINELLI: Yes, sir, that is correct.
2 When I am finished and the Board is finished asking
3 questions, if you wish to ask additional questions,
4 just let me know and then you will be given an
5 opportunity.

6 MR. TUGGLE: Okay.

7 MR. PINELLI: Then we are ready to
8 proceed. Is Dr. Peters on the line as well?

9 DOCTOR PETERS: Yes.

10 MR. PINELLI: Doctor Peters and
11 Firefighter Tuggle, could you both raise your right
12 hands?

13 (Witnesses sworn.)

14 JOHNNY TUGGLE

15 a witness herein, having been first duly sworn, was
16 examined and testified as follows:

17 EXAMINATION

18 BY MR. PINELLI:

19 Q Sir, for the record, would you please
20 state your name and spell your last name?

21 A Johnny Tuggle. My last name is
22 T-u-g-g-l-e.

23 Q Mr. Tuggle, what is your rank with the
24 Fire Department?

1 A Firefighter EMT, First Responder.

2 Q What was your last assignment before you
3 went on layup?

4 A Engine 60.

5 Q Sir, you should have been provided a copy
6 of Board Exhibits 1 through 13 before this hearing
7 date. Did you receive such exhibits?

8 A Yes, I received those exhibits.

9 Q Did you have an opportunity to review
10 them?

11 A Yes, I reviewed them.

12 Q Do you have any objection to their
13 admission into the record for the Trustees to
14 consider as part of your application?

15 A No.

16 MR. PINELLI: Thank you.

17 Mr. Chairman, I would move for admission
18 of Board Exhibits 1 through 13, without objection
19 from the applicant.

20 CHAIRMAN FORTUNA: Admitted without
21 objection.

22 MR. PINELLI: Thank you.

23 (Board Exhibits 1 through 13 were
24 admitted into evidence.)

1 BY MR. PINELLI:

2 Q Finally, Mr. Tuggle, did you have any
3 additional exhibits that you wanted to present to
4 the Board, other than those Board Exhibits?

5 A Only exhibit I have, I wasn't sure if
6 they were going to be in touch with the Captain for
7 a witness so I end up getting a record of the
8 journal, the company journal, where he wrote his
9 statement down on so I didn't know.

10 Q We do have a copy of the 160 so when we
11 get to his testimony we will explore that further
12 if necessary, okay?

13 A Okay.

14 Q Now, sir, let's start with your
15 application that you filed with the Board under
16 oath. You are seeking this disability based upon
17 an injury that you say you sustained on August 10th
18 of 2020; is that correct?

19 A That is correct.

20 Q Understanding that the Board has your
21 written statement, could you please just briefly
22 describe for them where you were and what caused
23 you the injury that you are claiming as the basis
24 of your application?

1 A At the time that this -- that I went on
2 layup from the Fire Department, I was at Engine 60,
3 and that was on August 10, 2020. I was at Engine
4 60. And you asked me to explain what happened,
5 right, that is correct?

6 Q Yes, sir, please, if you would.

7 A At that time -- during the course of our
8 day, when I come into work, normally at a certain
9 time of day, at 0800 we have a mask drill.

10 During that mask drill, all the members
11 take the harness with the oxygen off the rig and we
12 set it up so we can inspect the rig to make sure it
13 is working properly so when we catch a fire we make
14 sure the tank is working properly and we're ready
15 for work.

16 After we did the mask drill, I pulled the
17 tank off my back to set it down to readjust my
18 straps so I could put the tank back on the rig.
19 The rig is the engine.

20 Once I lifted it up off the floor and I
21 reached it up over my head to put it back on the
22 rack inside the rig, that is when I felt a pain,
23 sharp pain, in my back.

24 So I went to sit down in front of the rig

1 and the Captain asked me what happened. At that
2 time I explained to him that I felt a sharp pain in
3 my back and it was going down my leg. He asked did
4 I want to go to the hospital in the ambulance and I
5 said yes.

6 At that time Ambulance 38 I think --
7 yeah, Ambulance 38 took me to Rush Hospital I
8 believe.

9 Q Now could you just tell us for the record
10 the name of the Captain that you spoke to?

11 A Captain Crowley.

12 Q Now was he your normal -- strike that.
13 You were assigned to Engine 60 for how long before
14 this incident?

15 A How long before that incident? Like how
16 many years was I at Engine 60?

17 Q Yes, sir.

18 A Engine 60 is my regular house so I am not
19 sure how long because I switched houses so many
20 times. I want to say I was at 60 for I think at
21 least two years. I was at a different engine
22 company before that. I want to say at least two
23 years.

24 Q During that two years was Captain Crowley

1 always your captain or was he just your captain on
2 that day?

3 A On that particular day, Captain Crowley
4 was in there for my lieutenant, Lieutenant Brandon.
5 At the time Captain Crowley was working for my
6 lieutenant. Normally Captain Crowley is on I want
7 to say the second shift. So I worked the first
8 shift.

9 Q So I understand, the first shift, what
10 are the hours of the first shift? In other words,
11 when do you start the first shift or when did you
12 start the first shift, what time?

13 A The Fire Department work three different
14 shifts; one, two, three. All shifts begin at seven
15 o'clock. From seven to seven in the morning. So
16 the shift starts at seven o'clock in the morning
17 until seven in the morning next day.

18 Q Thank you. You injured your lower back
19 as you just described, correct?

20 A That is correct.

21 Q Can you just for the benefit of those of
22 us who don't know the tank you are referring to
23 that is an air tank; is that correct?

24 A That is correct. That is an air tank

1 that is connected to a harness.

2 Q Just ballpark, how much does that weigh,
3 do you know?

4 A About a 50-pound tank. About 50-pound
5 tank not including the harness.

6 Q Were you lifting the harness and the tank
7 at the same time or just the tank?

8 A That is correct. The tank is placed
9 inside the harness so you can wear the tank on your
10 back. Yes, I was lifting the harness and the tank
11 at the same time.

12 Q Any idea what the harness weighs?

13 A The harness I'd have to say maybe 20
14 pounds, maybe.

15 Q Thank you. Now this back injury -- prior
16 to this date, you had injuries to your lower back
17 before; isn't that correct?

18 A Yes. Back in 2017.

19 Q The records indicate in March of 2017 you
20 laid up for a lower back injury, right?

21 A Right. That is what the doctor told me,
22 it was a lower back injury. I told him I thought
23 it was the piriformis muscle. He said that is
24 related so it is technically a back injury so yes.

1 Q Now that back injury that you had in
2 2017, was that the first time you ever had an
3 injury to your lower back?

4 A Yeah, that was the first time back in
5 2017, that was the first time I had a lower back
6 injury.

7 Q How did that injury occur? What caused
8 you that injury?

9 A Back then at that time, when I woke up
10 that morning, which is stated in my Board Exhibit
11 pack. I said that I woke up to Doctor Cheng. When
12 I went to see him, I stated that I woke up that
13 morning with a back pain. I woke up that morning
14 and I went to work with pain. My lieutenant at the
15 time looked at me. He asked me was I okay and did
16 I want to go on layup. I said, no, I will be fine.

17 I worked the whole day, my whole 24
18 hours, in pain that day and after that day the next
19 morning I went to the emergency room and once I
20 left -- the emergency room gave me Toradol shot and
21 I ended up seeing Doctor Cheng for another visit.

22 Doctor Cheng, after he saw me, he
23 examined me, and that is when he told me that it
24 wasn't my piriformis muscle. He told me that it

1 was the lower back issue and he asked me did I play
2 any sports. At that time, I said, well, I compete
3 in Brazilian Jiu Jitsu but that is not how this
4 happened. I told you I woke up this morning like
5 that. And then after he further examined my back,
6 that is when he told me it was probably sciatica.

7 But then he sent for a MRI and on my next
8 visit and he looked at the MRI, he said it wasn't a
9 herniated disc. He said my vertebral height and
10 the disk space was preserved and I didn't have any
11 stenosis.

12 So he asked me did I want a steroid shot.
13 I said, no. Can I do chiropractic therapy? Do you
14 have a suggestion for that? And that is when I
15 ended up going to the chiropractor and that is when
16 I started seeing Dr. Knox for chiropractic therapy.

17 She did this traction therapy on my back,
18 along with stretching and flexion. I didn't have
19 any steroid shots back then. I didn't have any
20 pain management back then. I just did regular
21 chiropractic therapy. Four months later I was back
22 at work.

23 Q A couple of followup questions, if I
24 might. With respect to the Brazilian Jiu Jitsu,

1 that is a contact sport; is that correct?

2 A No, that is more like -- it is -- it's
3 more like wrestling. Where you manipulate
4 different body parts so it is not like kicking and
5 punching. None of that. No flipping or tossing.
6 It is pretty much like wrestling.

7 Q How long had you been engaging in that
8 prior to March of 2017?

9 A At that time it was like five years.

10 Q How regularly would you engage in it? In
11 other words, was it something you did every week, a
12 couple of times a week? How often would you engage
13 in it?

14 A I did that three times a week. The other
15 times I was at work so I did it three times a week.

16 Q Was it a competitive sport? Did you
17 compete in tournaments and things like that?

18 A Yes. I stated that to Dr. Cheng at the
19 time. I told him I competed in Brazilian Jiu
20 Jitsu.

21 Q When you started it five years before
22 2017, so around 2012 approximately, until the date
23 of this March 2017 injury, did you ever injure your
24 back engaging in Jiu Jitsu?

1 A During the year of 2017, 2012 to 2017,
2 did I ever injure my back?

3 Q Doing Jiu Jitsu, correct.

4 A No, I have never had a back injury doing
5 Jiu Jitsu. All of my injuries as stated in this
6 exhibit pamphlet shows all of my injuries that I
7 sustained doing my Jiu Jitsu I had two triceps
8 injuries. I had a shoulder injury. I had a knee
9 injury. Other than that, I have never hurt my back
10 doing Jiu Jitsu.

11 Q Now, so you mentioned that you went
12 through some conservative treatment in 2017 and you
13 were able to return to work approximately in May of
14 2017; is that correct?

15 A That is correct. April, May, yeah, that
16 is correct.

17 Q Then we get into 2018, you had a shoulder
18 injury; is that correct?

19 A That is correct. That was from the
20 Brazilian Jiu Jitsu incident, I had a shoulder
21 injury.

22 Q But no part of that incident was a back
23 injury, is that correct, or not?

24 A No, that was strictly a shoulder injury.

1 Q All right. Then you went back to work
2 after that and you continued to work. Did you lay
3 up at any time after 2018 and before this incident
4 you have testified to on August the 10th of 2020?

5 A No. After my shoulder injury, and I
6 returned to work, that was that shoulder injury.
7 After that shoulder injury, the only other incident
8 that came up was the incident involving this
9 present back injury.

10 Q The records indicated that you went to
11 Rush Oak Park Hospital on August the 8th of 2020,
12 which was two days before this August the 10th
13 incident. Is that accurate, that you did go to
14 Rush?

15 A That is correct.

16 Q The reason you went to Rush, according to
17 the records from Rush, is that you were having
18 lower back pain that was radiating down your right
19 leg; is that correct?

20 A That is correct. I went there on August
21 the 8th for that reason.

22 Q And when you went there on August the
23 8th, did you report to the emergency room that the
24 pain had started the night before while you were on

1 shift, so that would have been 8-7; is that
2 correct?

3 A That is correct. I told them that I did
4 it at work on the 7th.

5 Q Yes. But you also told them it was not a
6 result of a specific incident or injury on the 7th,
7 correct?

8 A Say that again.

9 Q You also told the emergency room that the
10 pain in your back that started on the 7th was not
11 the result of a duty incident, correct?

12 A Right. Yeah, I told them it wasn't a
13 result of a duty injury, that is correct. I told
14 them it happened when I was going up the stairs
15 later that night at eight o'clock.

16 Q So then you arrived at the hospital, Rush
17 Oak Park, at 6:30 or so in the morning the day
18 after your shift; is that correct?

19 A That is correct. I finished my shift out
20 and that morning I got up and I made it to my car
21 and I realized that I needed to go to the emergency
22 room because the over-the-counter medications I had
23 been taking at work, I took -- I iced it. It
24 didn't seem to get better so I drove myself to the

1 emergency room on the 8th.

2 Q Was the 8th a workday? Were you supposed
3 to be working that day or not?

4 A No, the 7th was the workday so I was off
5 on the 8th.

6 Q Would you have been off on the 9th as
7 well then, too? So your next regular shift would
8 have been the 10th, correct?

9 A That is correct.

10 Q So you drove yourself on your off day at
11 6:30 in the morning to Rush for treatment for lower
12 back pain, which you just described, and they gave
13 you some medications and so forth for it; is that
14 correct?

15 A Yes, they gave me a Toradol shot. They
16 gave me a prednisone patch. They gave me a
17 lidocaine patch and they gave me some kind of
18 medication and they released me to go back to work.

19 Q So then you did go back to work on the
20 10th and according to your testimony your shift
21 would have started at seven o'clock on the 10th; is
22 that correct?

23 A It starts at seven o'clock but most
24 firemen come to work at six o'clock in the morning

1 so I made it to work at six o'clock in the morning.

2 Q Then this mask drill that you engaged in,
3 that was at about eight o'clock or so, correct?

4 A That is correct, that is the 0800 mask
5 drill.

6 Q Between the time you arrived at the
7 station until this mask drill, did you have any
8 calls that you went on or were you in the station
9 the whole time?

10 A No. During that time I was in the
11 station. When we come to work, we eat breakfast as
12 firefighters. So we eat breakfast. After
13 breakfast we generally have roll call.

14 Q You didn't have any calls you went on
15 before this incident, correct?

16 A No. No. That is correct.

17 Q Just a few more questions here. Was
18 anybody else present at the time that you were
19 lifting the tank that you saw? Fire personnel that
20 were around you when you were lifting the tank,
21 that actually saw you lifting the tank.

22 A Well, one of the guys that is on the
23 engine with me, Firefighter Peoples, was there that
24 day. So all the members were there present. But

1 at that time I was standing next to Firefighter --
2 I think Firefighter Peoples was on-duty. So he --
3 I am not sure if he was actually looking at me when
4 it happened but when I made a noise, like ah my
5 back, that is when he asked me and the captain
6 asked me what just happened and then I told them.
7 So I can't say positively he saw me but he was
8 definitely there standing next to me.

9 Q Thank you. Now with respect to that
10 emergency room visit on August the 8th of 2020, the
11 Fire Department Medical Section records do not
12 refer to that. Did you not tell them about that?

13 A At that time you mean on the -- I don't
14 understand. I didn't tell them about that when? I
15 told them about -- they asked me for those records
16 at some point in time. They asked me -- they asked
17 me did I go to the emergency room on that day. I
18 say, yeah, and they said we don't have those
19 records. That is when I went out there to the
20 hospital where I went and I retrieved those records
21 and I sent them off to them because they didn't
22 have them.

23 Q So you eventually got them the records
24 from that emergency room visit; is that correct?

1 A That is correct. I went out on my own.
2 I went and got the records and then I faxed them
3 back to the lady that was in charge of the records.

4 Q Now, sir, you were interviewed by Dr.
5 Peters, who is the Fund's consultant, the Fund's
6 doctor, right, a month or so ago?

7 A That is correct.

8 Q He asked you all about your treatment
9 history; is that correct?

10 A That is correct.

11 Q When he interviewed you, did you tell him
12 in that interview about the August 8th emergency
13 room visit or not?

14 A I don't recall telling him anything about
15 that visit because when he called me he said he was
16 about to ask me a series of questions about my
17 injury and we proceeded from there so I don't
18 recall talking about August 8th.

19 Q Could you just tell the Board briefly in
20 your own words what is the current condition of
21 your back with respect to any limitations or pain
22 that you are experiencing now?

23 A Currently -- since I had that
24 conversation with Doctor Peters, at the time I told

1 him that my pain was only in my right side butt and
2 I think I recall telling him it was starting to
3 travel to the left side. Now currently my pain is
4 in both sides of my butt. It is a nerve pain in my
5 butt and that nerve pain is such a pain where I
6 can't sit for long periods of time. I can walk
7 better than I can sit but walking is like limited.
8 At a certain while I have to sit down and rest, if
9 I am doing any kind of work around the house. Like
10 outside in the garden or a lot of bending up and
11 down, then I start aggravating the nerve pain in my
12 butt. Mostly it is the nerve pain in my butt. My
13 back pain is more often when I am sitting in a
14 chair too long.

15 So I am constantly moving around in the
16 house, different couches, different chairs. Moving
17 up and down. So my pain is still at a level where
18 if I am sitting more than five minutes, I am
19 uncomfortable.

20 If I'm driving longer than 15, 20
21 minutes, I am uncomfortable. I am still having
22 that same nerve pain in my butt area. As far as my
23 leg pain, it don't really run down my leg. It is
24 just persistent in my butt mostly and in my lower

1 back depending how long I am sitting. So I am
2 still dealing with that pain.

3 My sleep, I used to be able to lay down
4 for a time but now I have to lay in the bed for a
5 little while and I get up. My sleep is totally
6 off. I get -- at best I will get three hours of
7 sleep a night. I am in and out of my sleep all
8 night long so I don't get myself to sleep.

9 Ever since they took me off of the
10 physical therapy -- my physical therapy was cutoff
11 August 10th. They took me off payroll. My
12 insurance lapsed. My physical therapy ended.

13 Now since I haven't been doing any
14 physical therapy, it was starting to get worse. I
15 decided I need to do something to help myself.

16 I was doing weight training. What they
17 call work conditioning at physical therapy. I was
18 doing that before they stopped my physical therapy.

19 So my weight training in physical therapy
20 I was doing squats, lunges, dead lifts, lifting
21 things over my head. I was doing things that was
22 required of me to do at work in physical therapy so
23 I was doing work therapy.

24 I was doing a lot of things at therapy

1 that I would be doing at work. They had me going
2 up the ladder with my sledge hammer. They had me
3 walking around with heavy things in my hands. I
4 was doing all these things at physical therapy,
5 that was a regular schedule for me.

6 Once that ended, now here I am stuck. I
7 decided I needed to do something to help myself to
8 get back to work, to get back to the way I was,
9 because my quality of life had been greatly
10 diminished.

11 So at that time I decided I needed to
12 find me a place where I can resume my physical
13 therapy. I sought out a place like 30 miles from
14 my house so I could continue my physical therapy
15 because the Fire Department cut me off. So I
16 couldn't just sit around and wait for, what, this
17 hearing and then start regressing back to a severe
18 issue.

19 So I decided I had two options and
20 another option was to find physical therapy. Do it
21 on my own. And that is when I found a facility
22 that had the equipment I needed and I continued my
23 physical therapy.

24 Q Are you engaging in that now currently?

1 A Yes, I have been going to physical
2 therapy. I have been doing my own physical
3 therapy. I waited for a couple of weeks after my
4 physical therapy was cutoff because I thought maybe
5 it would start back up and it didn't. I was
6 getting worse.

7 Currently, yes, I do my physical therapy
8 on my own.

9 Q What is the name of the location you
10 attend for that?

11 A It is a LA Fitness in Evanston. I travel
12 almost an hour, 30 miles, to get to that place,
13 just so I can help myself get back to normal.

14 Q Is that a program that is being run by a
15 physical therapist or are you just working out on
16 your own at that facility?

17 A No, that is -- I workout. I do all of
18 the things I was doing in physical therapy. They
19 have all the machines that I need, back machines,
20 to help my back get better. Yes, that is what I
21 do, I go to a gym that has the proper equipment.

22 Q Despite that physical therapy that you're
23 doing, you're still experiencing these limitations
24 that you just described?

1 A Yes. Whenever I was doing the physical
2 therapy, I was always experiencing pain while I was
3 doing the physical therapy but I still had to do
4 what I needed to do to get back to work. Even
5 though I am doing the exercises in physical therapy
6 then and now, it is still -- I still have pain but
7 what happens is once I finish my whole workout in
8 physical therapy, and even now after some time,
9 maybe a hour or so, then my adrenalin goes down and
10 the pain is back to where it was. When I am doing
11 my physical therapy, my pain is not as bad.

12 Q Okay.

13 A So it still hurts a little bit.

14 Q Do you take medication for the pain when
15 you do experience it?

16 A Yes, I take Gabapentin mixed with
17 Naproxen. I was just doing the Gabapentin by
18 itself until Dr. Fisher told me that I needed to
19 take the Naproxen because I told him the Gabapentin
20 wasn't working at the time. He said that I needed
21 to take Naproxen with it.

22 Once I started to take the Naproxen and
23 the Gabapentin twice a day, then it started helping
24 me to relieve some of the pain. I was able to

1 sleep a little bit better at night.

2 Q Okay. There's an indication in the
3 records that Dr. Fisher recommended you have a
4 radiofrequency ablation sometime. Did you undergo
5 that or not yet?

6 A Are you talking about the shot?

7 Q No. You did have shots, I saw that, but
8 he ordered what is called a radiofrequency
9 ablation, which I think is an electrical
10 stimulation type procedure.

11 A Oh, no. No, he didn't order that. On my
12 last visit with him, I had already had three shots
13 with him. So my fourth visit we started talking
14 about -- he asked me how I was doing after the
15 third shot. I told him it helped a little bit
16 more. He said, oh, that is good. Well, since that
17 helped -- what we will do, he said, we will do
18 another shot, a fourth shot. I said a fourth shot?
19 He said, yeah. If that don't work, he said, maybe
20 we can look at some surgery. I said what kind of
21 surgery? He said, you know, like burning the
22 nerves or we can do a fusion. I asked him what was
23 burning the nerves? Maybe that is what he was
24 talking about but we never talked about actually

1 doing that on a particular day.

2 My next visit should have been a shot on
3 August the 25th. I never did get that shot because
4 it wasn't approved. It would never have been
5 approved because they took me off of payroll and I
6 didn't have any more insurance so that means who
7 was going to pay for that?

8 So I never did get that shot done that I
9 was supposed to have. I didn't have no more
10 insurance so.

11 Q I understand. Thank you. Finally, since
12 you went on layup, have you engaged in any
13 activities by which you earn income?

14 A Oh, no. Like another outside job?

15 Q Yes.

16 A No, I don't have any other jobs.

17 Q Have you engaged in any sporting
18 activities? I am not talking about physical
19 therapy but I am talking about Jiu Jitsu or any
20 other sporting activities since you went on layup?

21 A No. No. My last time I even went to a
22 Jiu Jitsu school was back in March of 2019. After
23 that I stopped my payments to that school so -- and
24 I have actual records of when I stopped my payments

1 to that school.

2 Actually, somebody called me sometime ago
3 and asked me that very question and gave me any
4 sports or Jiu Jitsu. And I was kind of shocked
5 that she used the word Jiu Jitsu because nobody
6 would use that term unless they live in that world.

7 So I told her, I said, no, I used to be
8 doing Jiu Jitsu but I don't do that anymore.

9 MR. PINELLI: Thank you, sir. That is
10 all the questions I have. Now I will turn it over
11 to the Board.

12 CHAIRMAN FORTUNA: Trustees, any
13 questions?

14 MEMBER MCPHILLIPS: No questions.

15 CHAIRMAN FORTUNA: Hearing none, Vince.

16 MR. PINELLI: Then I think we are
17 supposed to have a witness who is available on the
18 line. I am hoping Captain Crowley is on the line?

19 CAPTAIN CROWLEY: This is Doug Crowley.

20 MR. PINELLI: Thank you. Can you hear
21 me, sir?

22 CAPTAIN CROWLEY: I sure can.

23 MR. PINELLI: Thank you, sir.

24 I am one of the attorneys for the Pension

1 Fund. I have a few questions for you.

2 CAPTAIN CROWLEY: What is your last name?

3 MR. PINELLI: Vince Pinelli.

4 CAPTAIN CROWLEY: Thank you.

5 MR. PINELLI: Before we start your
6 testimony, could you please raise your right hand?

7 (Witness sworn.)

8 DOUGLAS CROWLEY

9 a witness herein, having been first duly sworn, was
10 examined and testified as follows:

11 EXAMINATION

12 BY MR. PINELLI:

13 Q Could you just state your name for the
14 record?

15 A My name is Douglas Crowley.

16 Q What is your current rank with the Fire
17 Department?

18 A I am a captain.

19 Q What is your current assignment?

20 A My current assignment is Engine 60 on the
21 second shift.

22 Q Directing your attention to August the
23 10th of 2020, do you recall if you were working at
24 Engine 60 on that day?

1 A I was indeed.

2 Q Do you recall what shift you were
3 working?

4 A The first shift.

5 Q Was that because you were filling in for
6 somebody else?

7 A I don't exactly remember. I have the
8 journal page on my phone, also, I can toggle to it,
9 that should give you a rationale of why Marlin
10 wasn't normally there. It could have been
11 something as simple as me working off shifts
12 overtime or it could have been a trade but I do not
13 remember.

14 Q That is really not important. The point
15 is simply that you were working the first shift so
16 thank you for that.

17 Were you familiar with Firefighter Tuggle
18 prior to that date?

19 A I knew Firefighter Tuggle was assigned to
20 the first shift prior to that day.

21 Q Had you ever worked with him on a shift
22 before that day?

23 A I think I did once. I wouldn't remember
24 the exact date and I think I would have been

1 working on the first shift again.

2 Q Okay. Back to August 10th at or about
3 sometime in the morning about eight o'clock or so,
4 were you present when he reported an injury?

5 A I was indeed.

6 Q Can you tell the board members, to the
7 best of your recollection, where you were and just
8 what you recall about that?

9 A So at 0800 we do the mask drill, which is
10 where every fireman tests to insure that their mask
11 functions, the SCBA mask that provides ambient air
12 to them in the event of a fire.

13 Typically when that is happening, I am
14 standing in a large circle at the front of the rigs
15 on the south end of the firehouse facing the
16 engine.

17 The reason for that is for supervision.
18 It is for me to watch everyone doing the mask
19 drill. See if any of the firemen have difficulty
20 doing the motor skills of testing the mask out.

21 It is really to inject the plan of the
22 day. That is where we talk about the housework
23 schedule and anything else going on during the day
24 so I would have been standing there.

1 Q Okay. Did something occur or did he
2 bring something to your attention about his
3 condition?

4 A He did indeed. I can give you the exact
5 language written in the journal.

6 Q Just so the record is clear, you have
7 been provided with a copy of the journal from that
8 day?

9 A No, I was not. I took it upon myself to
10 drive to the firehouse and take a screenshot of the
11 journal page for August 10th.

12 Q You have that with you right now, that is
13 what you are reading?

14 A I do indeed.

15 Q Thank you, sir. Go ahead.

16 A And the journal entry just states,
17 "During SCBA inspection, Firefighter Tuggle
18 reported feeling a pop and sharp lower back pain
19 while returning the SCBA back to the brackets in
20 the cab.

21 My next actions were to notify the OMEC
22 and Battalion and Ambulance 38 transported
23 Firefighter Tuggle to Rush for further evaluation."

24 Q So, as you sit here today, you don't have

1 an independent recollection of actually seeing him
2 lifting the tank. You just have a recollection of
3 the report that he had been injured while doing it.
4 Is that correct?

5 A That is correct. You know, you have to
6 be on and off the brackets. I wouldn't witness
7 every single fireman doing that. The cab doors
8 would be open. I would be standing in a place
9 where I wouldn't have direct line of sight of that.

10 Q Okay, that's fine. Then Firefighter
11 Tuggle testified to the approximate weight of the
12 tank at about 50 pounds and the harness maybe
13 another 20 pounds. Based on your experience, does
14 that sound about accurate?

15 A I would say the harness and tank together
16 weigh less than 45 pounds. But, you know, that is
17 just from experience.

18 Q That is an approximation. I understand.
19 Thank you.

20 He was transported by ambulance from
21 there and I take it then you didn't see him back at
22 work at any time after that; is that correct?

23 A No. I haven't seen him since, to be
24 truthful.

1 Q Do you recall seeing him at the time,
2 though, that he was -- you know, right before he
3 was placed in the ambulance or so forth? Did you
4 talk to him I guess is a better question?

5 A I didn't have an extended conversation
6 with him. Usually what happens is a lot of the
7 guys they kind of show up between the hours of six
8 and seven and then they have their own
9 responsibilities.

10 Their first responsibility is actually to
11 look at me and say, hey, I am here. I am ready to
12 go. And then they have to take the other
13 firefighters' gear off and install their gear on.
14 Start to maintain an inventory of the rigs to make
15 sure everything is there for service.

16 It wouldn't be like I was having a
17 meeting with him or any sort of extended
18 conversation.

19 Q Right. My question, I'm sorry, it wasn't
20 a good one. Directing you to after he had the
21 incident and before he left in the ambulance, did
22 you talk to him or observe him at all after the
23 incident, that you remember?

24 A No.

1 MR. PINELLI: Okay. Thank you, sir, that
2 is all the questions I have. I will turn it over
3 to the Board, if the Board has any questions.

4 CHAIRMAN FORTUNA: Trustees, any
5 questions?

6 MEMBER MCPHILLIPS: No questions.

7 CHAIRMAN FORTUNA: Thank you.

8 MR. PINELLI: Firefighter Tuggle, do you
9 have any followup questions?

10 CAPTAIN CROWLEY: Gentlemen, I am hanging
11 up.

12 MR. PINELLI: Thank you, Captain. We
13 appreciate your time.

14 MR. TUGGLE: Actually, I do have
15 something.

16 MR. PINELLI: Unfortunately, I think we
17 just lost the captain.

18 MR. TUGGLE: He said he was hanging up.

19 MR. PINELLI: He is not on the line.

20 MR. TUGGLE: He said he was hanging up.
21 He said he was leaving.

22 MR. PINELLI: Right. Okay.

23 MR. TUGGLE: I do actually have something
24 to followup, something else to say.

1 MR. PINELLI: Hold on. I will give you
2 that opportunity. Is this something you want to
3 say about the incident, what occurred at that time?

4 MR. TUGGLE: Yeah, it's also surrounding
5 the incident. You asked me did I have something
6 else to say or ask or something like that.

7 MR. PINELLI: Yes. Do you have something
8 you would like to add?

9 MR. TUGGLE: I just have something to say
10 about the whole -- you know, I guess it applies to
11 the incident.

12 MR. PINELLI: Okay. Well, could you just
13 hold that. Let me finish with the doctor and then
14 I will give you that opportunity. Is that okay?

15 MR. TUGGLE: Right.

16 MR. PINELLI: Okay. At this time then I
17 would call Dr. Peters to testify.

18 (Witness previously sworn.)

19 MICHAEL I. PETERS, M.D.

20 a witness herein, having been first duly sworn, was
21 examined and testified as follows:

22 EXAMINATION

23 BY MR. PINELLI:

24 Q Sir, would you please state your name?

1 A Michael I. Peters.

2 Q You are a physician; is that correct?

3 A Yes, sir, that is correct.

4 Q Is a copy of your qualifications as a
5 doctor attached to the board exhibits?

6 A Yes, it is.

7 Q Do you perform a function as a consultant
8 to this fund?

9 A Yes, I do.

10 Q In that capacity, do you review medical
11 records, examine or interview applicants and report
12 to the Board?

13 A Yes, I do.

14 Q Did you follow that procedure with
15 respect to Firefighter Tuggle?

16 A Yes.

17 Q Did you file a written report with the
18 Board that is marked as Board Exhibit Number 2?

19 A Yes, I did.

20 Q Doctor, when you interviewed him -- is
21 what you did an interview versus an exam?

22 A We did a phone interview because of the
23 pandemic.

24 Q Right. When you interviewed him was the

1 information he provided to you complete and
2 consistent with the medical records that you had in
3 your possession at that time?

4 A It was all consistent, except for the
5 part about the August 8, 2020 Rush Oak Park ED
6 visit.

7 Q What was lacking with respect to that?

8 A There was no mention of the ED visit from
9 Firefighter Tuggle. And when I asked him about any
10 back pain episodes since 2017 when he laid up until
11 August 10th of 2020 when he lifted his air pack he
12 said no.

13 Q Okay. Doctor, you reviewed the medical
14 records; is that right?

15 A Yes, I did.

16 Q And in those records, it indicates he's
17 had two MRIs of his lower back. One was in 2017
18 after that layup for back pain, right?

19 A Yes. April 2017.

20 Q Right. And then he had one in September
21 of '20 after the August '20 incident; is that
22 correct?

23 A September 28, 2020, yes.

24 Q Now what did those MRIs show with respect

1 to the condition of his lower back?

2 A That from the levels of his lumbar spine
3 between L-3 to S-1, he had mild to moderate
4 impingement of nerve roots on the right side and
5 mild impingement at a different level of his spinal
6 cord.

7 Q Was there also a comment in there with
8 respect to the differences between the two MRIs, if
9 they showed any progression or differences from the
10 '17 to the '20 MRI?

11 A There wasn't significant change.

12 Q How would you characterize the nature of
13 those conditions in his back? In other words, are
14 they degeneration? What are they indicative of?

15 A The time course of his first injury and
16 the first MRI to his August 10th reported injury
17 and the second MRI a month later would suggest that
18 this is a chronic degenerative condition.

19 Q That is causing him pain?

20 A Yes.

21 Q Now the incident he described on the
22 10th, removing the air tank and lifting it and so
23 forth, is that an incident or is that conduct that
24 could contribute to exacerbation of that

1 degenerative condition causing subsequent pain?

2 A I think lifting his air pack, removing
3 his air pack from his back and swinging it up and
4 putting it up on the bracket, is something that
5 could flare an underlying condition. I don't think
6 the air pack and the bracket weighed -- I don't
7 think the tank and the bracket weighed 70 pounds.
8 The captain didn't think it weighed 70 pounds. I
9 don't think that weighs 70 pounds. I don't know
10 the exact weight.

11 Could it flare an underlying condition,
12 yes.

13 Q Regardless of the weight of it, just
14 doing that movement with the weight, could that
15 cause some kind of a flare-up in the degeneration?

16 A Yes.

17 Q Based upon your experience, would you
18 expect that to be a permanent condition of acute
19 pain or would you expect it to resolve?

20 A I think it's likely that could cause a
21 flare. I don't think it's likely that it would
22 cause a permanent pain condition or permanent
23 radiating pain condition.

24 Q Did you find any evidence of any other

1 objective testing or evidence in the record that
2 would explain the cause of his current pain, other
3 than the degenerative condition you mentioned in
4 his spine?

5 A No, I did not.

6 Q Is any doctor currently recommending
7 surgical intervention for his back?

8 A Firefighter Tuggle mentioned that during
9 his last visit the physician talked about the
10 possibility of a radiofrequency ablation or
11 possibly surgery but no specific plans or a
12 specific surgical recommendation was made in the
13 records that I saw.

14 Q Now did you eventually obtain the records
15 from the 8-8 emergency room visit that he had prior
16 to this incident?

17 A Yes. Those records were provided to me
18 after our phone interview.

19 Q Did you review them?

20 A Yes.

21 Q What if any indication did they have for
22 you with respect to the condition of his lower
23 back?

24 A Well, the history provided -- the history

1 that was recorded by the ED physician at Oak Park
2 confirmed that there was a flare of low back pain
3 two days before with radiation down the leg and
4 possibly weakness of the right leg. Mentioning
5 that the leg had given out. It suggested that the
6 pain -- the flare had started two days before the
7 10th. Actually on the 7th, the evening of the 7th
8 at work, without a specific duty mechanism of
9 injury.

10 Q Now, based upon everything you reviewed,
11 is it possible for you to reach an opinion to a
12 reasonable degree of medical certainty whether the
13 cause of his current pain to the extent he's
14 reporting it is the result of the August 10, 2020
15 incident or the natural progression of his
16 degenerative condition in his back or something
17 else?

18 A I don't think it's likely that the
19 episode with the mechanism he described on August
20 10th of '20 would be causing essentially permanent
21 or chronic low back pain, radicular symptoms. I
22 don't think that is likely.

23 I think it's likely that it caused a
24 flare. My expectation would be that would have

1 improved by now and I don't think that it's likely
2 that was an acute event to cause a big change in
3 his underling degenerative problems. I think the
4 problem is his underlying degenerative disk
5 disease. I don't think it is likely that the air
6 pack incident caused a permanent problem.

7 MR. PINELLI: Thank you, doctor, that is
8 all the questions I have.

9 CHAIRMAN FORTUNA: Trustees, any
10 questions for Dr. Peters?

11 Hearing none, Vince.

12 MR. PINELLI: Mr. Tuggle, before Dr.
13 Peters leave the call, do you have any questions
14 for him?

15 MR. TUGGLE: Yes, I have actually a
16 couple of things to say about that day. He said he
17 asked me a question about had I had any prior back
18 incidences prior to August 10, 2020 other than
19 2017. At that time I said, no, I didn't have any
20 prior back incidence but at that time my mind was
21 thinking my pain from that day. So my mind didn't
22 go back to the 8th I am guessing because the 8th
23 when I was -- actually, the 7th when it happened.
24 The 7th, when I hurt my back and ended up going to

1 the emergency room that day, when it actually
2 happened it was such a mundane situation and I
3 ended up going to the emergency room. They gave me
4 medicine for it and over the weekend I slept the
5 whole weekend. I woke up fine, no pain, no aches,
6 no nothing. So I didn't think to say, oh, yeah, by
7 the way, you know, I had a back injury on this day.
8 I wasn't even thinking like that when he asked me
9 that question. He asked did I have anything prior
10 from August 10, 2020 to 2017. So my mind actually
11 went all the way back to 2017 and I was like no.
12 So other than that 2017 event, I wasn't even
13 thinking at all and so they reminded me. Oh, the
14 incident. I wasn't even thinking about that. It
15 is not like I was trying to purposely omit that
16 situation that happened on the 8th. I just wasn't
17 thinking about that incident at all because my mind
18 just went straight back to 2017.

19 Other than that, he said that -- he said
20 a question about my vertebrae and as far as did it
21 get worse from 2017 to 2020. And I think -- I
22 think I am pretty sure he said it was a
23 progression. Because as it is stated Dr. Cheng, in
24 Exhibit 9E.3, Dr. Cheng said the vertebral disk

1 space was preserved and I didn't have any stenosis.
2 So that would show that further down the road in
3 2020 that there was a progression and Dr. Peters
4 said it is not likely that it could be exacerbated
5 -- I think it -- he said it is not likely that it
6 could be permanent damage and it is not likely --
7 he said it probably can flare-up is the word. It
8 can flare-up. Flaring up is a matter of I am
9 guessing taking inflammatory drugs to make it go
10 down. I have had numerous shots, strong shots,
11 Toradol. I had three -- what do you call it --
12 Prednisone Dosepaks and all this medicine.

13 He said a flare-up. I am pretty sure,
14 according to the doctor, that you read this whole
15 manual, I don't know if he read the whole manual,
16 but Dr. Fisher, my therapist, constantly wrote in
17 this big packet that the pain level that I was
18 having was always at least an eight.

19 I don't know why he called it just a
20 flare-up and it's likely that it didn't happen the
21 way I said it happened. You can sneeze and throw
22 your back out. You can bend over and pick up a ten
23 pound weight and throw your back out. These things
24 happen.

1 As a firefighter, I have a very
2 physically demanding job that requires for me to
3 lift a lot of heavy weight. As a firefighter, we
4 repeatedly put stress on our skeleton everyday.
5 Accidents happen. Injuries happen. This is an
6 occupational hazardous job.

7 That being said, this stress, all this
8 weight on my skeleton, this stress can damage the
9 spine over time.

10 To say it is hardly likely that this is a
11 cause -- that this degenerative situation is like
12 ongoing.

13 No, I have weight on my back every time I
14 go to work. When you add age into that equation,
15 you're bound to sustain some type of injuries
16 during your career as a firefighter.

17 And actually studies say that a lot of --
18 there is a lot of variables that can cause
19 stenosis. Posture, weightbearing down on your
20 skeleton and aging.

21 It sounded like he was possibly saying
22 that it wasn't likely that I hurt myself with the
23 tank. He continued to say that. It doesn't matter
24 the weight. People do a lot of things that hurt

1 their back just moving the wrong way and throwing
2 their back out and end up having a pinched nerve.

3 My pain is severe to the point where I am
4 on meds regularly. If you look at the paperwork,
5 you can see the problem. He said it is highly
6 likely I just have a flare-up. So I don't
7 understand why he called it just a flare-up. That
8 totally confused me because it is in the doctor's
9 paperwork.

10 MR. PINELLI: I appreciate that. I
11 guess, Dr. Peters, do you wish to have any comment
12 on that? It wasn't really a question. It was more
13 a statement, which I understand, and that's fine,
14 Mr. Tuggle. The Board is listening.

15 Dr. Peters, do you have any response to
16 that?

17 DOCTOR PETERS: I think that I respect
18 Firefighter Tuggle's pain complaint. I don't in
19 any way intend to minimize the fact that he's
20 reporting pain. But the question you are asking me
21 is specifically related to whether the incident on
22 August 10th is likely to cause a permanent ongoing
23 pain problem and my professional opinion is no.

24 Even though all of his physicians and the

1 physical therapists have documented pain levels,
2 that is a subjective complaint. Not to say that he
3 doesn't have pain but it is a subjective complaint.
4 It is not an objective measure.

5 My opinion regarding degenerative disease
6 is really based on the MRI findings, which I
7 consider to be objective.

8 So the question you asked is it likely
9 that the August 10th incident caused what he has
10 now? I would say my opinion is that that is
11 unlikely and that is why I used the word flare.

12 I would expect lifting an air pack or
13 lifting anything heavy could cause an exacerbation
14 of an underlying back issue. Yes, I think that can
15 happen.

16 I don't think it's likely given his
17 disease state that a year later he would still be
18 having radiating pain, that was my opinion. I
19 didn't mean to in any way say that he doesn't
20 experience pain.

21 MR. PINELLI: Okay. Thank you, doctor.

22 Mr. Tuggle, you have made a lot of points
23 to the Board and they will consider those. I think
24 the evidence is concluded, unless you have

1 something further to present.

2 MR. TUGGLE: It sounded like to me it is
3 of the opinion of a single doctor that that event
4 didn't cause my situation. I don't understand why
5 he is saying that it couldn't have caused my
6 situation lifting that tank, that makes no sense to
7 me, and he's throwing in the degenerative disease
8 situation where everybody ages. Everybody's back
9 degenerates over time.

10 I am 58 years old so I don't understand.
11 Does he really think at age 58 my bones is going to
12 be the same as when I was 20? Highly unlikely,
13 that would never happen.

14 Everybody has this degenerative situation
15 going on in their back. It is not fair to make
16 like a thing I have a degenerative problem that has
17 been ongoing so that is probably the underlying
18 problem. I don't think so.

19 The problem is I went to work on that day
20 doing my duties as a firefighter. Before that mask
21 drill even took place, that officer, he had to
22 check every individual and make sure that they are
23 physically fit for duty, that is part of his job
24 description. He checked us. He made sure

1 everybody was physically fit for duty. I was
2 physically fit for duty until prior to that
3 incident where I lifted that tank up.

4 According to Dr. Peters, that couldn't
5 have happened lifting that tank up.

6 MR. PINELLI: I don't mean to cut you
7 off, Firefighter Tuggle. Your point is well taken.
8 The doctor has given his opinion, a medical
9 opinion. He's not saying you weren't injured that
10 day. He just can't give an opinion to a certainty
11 that that injury, that incident, caused your
12 current pain, that is all he is saying.

13 I think at this point you have made your
14 point. It will be up to the Board to decide on the
15 issue of causation. That is a Board decision, it
16 is not the doctor's decision. It is the Board's
17 decision to make after they hear all the evidence,
18 including your testifying and your statements.

19 Okay?

20 MR. TUGGLE: Right.

21 MR. PINELLI: Okay.

22 MS. BURNS: The record may reflect that
23 Trustee Conyears-Ervin had to leave the hearing
24 during the presentation.

1 MR. PINELLI: Okay.

2 MEMBER SONI: This is Trustee Soni. I
3 was here at the beginning of the presentation.

4 MS. BURNS: Thank you, Trustee Soni.

5 MR. PINELLI: Nothing further. I believe
6 the evidence is concluded.

7 MEMBER MURPHY: I would like to make a
8 motion to go into executive session pursuant to
9 Section 2(c)4 of the Open Meetings Act.

10 CHAIRMAN FORTUNA: There is a motion by
11 Trustee Murphy to go into closed session.

12 MEMBER MCPHILLIPS: Second.

13 CHAIRMAN FORTUNA: Trustee Murphy.

14 MEMBER MURPHY: Yes.

15 CHAIRMAN FORTUNA: Trustee Sheridan.

16 MEMBER SHERIDAN: Yes.

17 CHAIRMAN FORTUNA: Trustee Soni.

18 MEMBER SONI: Yes.

19 CHAIRMAN FORTUNA: Trustee McPhillips.

20 MEMBER MCPHILLIPS: Yes.

21 CHAIRMAN FORTUNA: Trustee Tebbens.

22 MEMBER TEBBENS: Yes.

23 CHAIRMAN FORTUNA: Trustee Valencia.

24 MEMBER VALENCIA: Yes.

1 CHAIRMAN FORTUNA: And I am a yes.

2 Motion carries.

3 We are now in closed session.

4 (Whereupon, the Board went into
5 Executive Session off the record.

6 No action was taken in Executive
7 Session.)

8 MEMBER MURPHY: I'd like to make a motion
9 to grant the benefits requested by Firefighter
10 Tuggle.

11 MEMBER MCPHILLIPS: Second.

12 CHAIRMAN FORTUNA: There is a motion to
13 grant. Seconded by Trustee McPhillips.

14 Trustee Murphy.

15 MEMBER MURPHY: No.

16 CHAIRMAN FORTUNA: Trustee Sheridan.

17 MEMBER SHERIDAN: No.

18 CHAIRMAN FORTUNA: Trustee Soni.

19 MEMBER SONI: No.

20 CHAIRMAN FORTUNA: Trustee McPhillips.

21 MEMBER MCPHILLIPS: No.

22 CHAIRMAN FORTUNA: Trustee Tebbens.

23 MEMBER TEBBENS: I am a no.

24 CHAIRMAN FORTUNA: Trustee Valencia.

1 MEMBER VALENCIA: No.

2 CHAIRMAN FORTUNA: And I am a no.

3 Motion carries.

4 MEMBER MURPHY: Mr. President, I'd like
5 to make a motion to deny the benefits requested by
6 Firefighter Toggle.

7 MEMBER MCPHILLIPS: Second.

8 CHAIRMAN FORTUNA: There is a motion to
9 deny by Trustee Murphy. Seconded by Trustee
10 McPhillips.

11 Trustee Murphy.

12 MEMBER MURPHY: Yes.

13 CHAIRMAN FORTUNA: Trustee Sheridan.

14 MEMBER SHERIDAN: Yes.

15 CHAIRMAN FORTUNA: Trustee Soni.

16 MEMBER SONI: Yes.

17 CHAIRMAN FORTUNA: Trustee McPhillips.

18 MEMBER MCPHILLIPS: Yes.

19 CHAIRMAN FORTUNA: Trustee Tebbens.

20 MEMBER TEBBENS: Yes.

21 CHAIRMAN FORTUNA: Trustee Valencia.

22 MEMBER VALENCIA: Yes.

23 CHAIRMAN FORTUNA: And I am a yes.

24 Motion carries.

1 Mr. Tuggle, sir, based on the evidence
2 that we have heard and considered, the Trustees
3 have voted to deny your benefit that you have
4 requested. You will be notified by mail of the
5 Findings of Fact and the Board's decision. Thank
6 you.

7 MR. TUGGLE: Do I have a chance to come
8 back at another date with a lawyer?

9 MS. BURNS: No, sir. You had a right to
10 have an attorney present for this hearing, and
11 Vince asked you at the beginning, if it was your
12 election to proceed without an attorney.

13 You do have the right to get an attorney
14 and to appeal the Board's decision to the Circuit
15 Court of Cook County. You need to do that within
16 35 days of being notified of the Board's decision,
17 which you haven't gotten yet, so the clock hasn't
18 started running.

19 We also are going to reach out to you
20 after the meeting at the request of several of the
21 Trustees on the board to explain to you other
22 options as well, because you do have certain
23 options under the Pension Code.

24 So you will be hearing from staff and

1 from Vince Pinelli after this meeting and we can
2 give you more detail so that you can take whatever
3 action you deem is in your best interest.

4 Thank you, sir.

5 MEMBER MCPHILLIPS: Mary Pat, thank you
6 for explaining that to him. I thought you did a
7 good job.

8 MS. BURNS: Thank you, sir. We'll make
9 sure we followup.

10 MEMBER MURPHY: Mr. President, your next
11 applicant is Firefighter EMT Michael Lopez, if he
12 is available.

13 CHAIRMAN FORTUNA: Michael Lopez.

14 MR. LOPEZ: Yes, sir.

15 MR. PINELLI: Good morning, Mr. Lopez.

16 I am one of the attorneys for the Pension
17 Fund. I would like to advise you of some
18 preliminary matters before we begin evidence.

19 First of all, for the record, this is an
20 application by Mr. Lopez for an Ordinary Disability
21 benefit being made on today's date.

22 Mr. Lopez, there are currently seven
23 trustees present to hear the evidence on your
24 application. If you don't know you should know you

1 need the yes vote of at least five of those
2 Trustees in order to receive this benefit. Do you
3 understand that?

4 MR. LOPEZ: Yes, I do.

5 MR. PINELLI: The record seems to
6 indicate that you do not have an attorney
7 representing you. Is it your desire to proceed to
8 today's hearing without an attorney?

9 MR. LOPEZ: Yes, it is.

10 MR. PINELLI: Lastly, it is the
11 applicant's burden of proof to present sufficient
12 evidence to the Board in order for the Board to
13 grant the benefit that the applicant is seeking.
14 Do you understand it is your burden of proof?

15 MR. LOPEZ: Yes, I do.

16 MR. PINELLI: Then by way of procedures,
17 I am going to start by asking you some questions
18 under oath. The board members may or may not have
19 questions of you. Then I will proceed to call the
20 Fund's physician consultant Dr. Peters. If there
21 is anything I don't ask him that you think is
22 important for the Board to know, please let me know
23 and you will be given that opportunity. Do you
24 understand the procedures?

1 MR. LOPEZ: Yes, I do.

2 MR. PINELLI: Okay. Then is Dr. Peters
3 on the line?

4 DOCTOR PETERS: Yes.

5 MR. PINELLI: Thank you. Mr. Lopez and
6 Dr. Peters, could you both please raise your right
7 hands?

8 (Witnesses sworn.)

9 MICHAEL LOPEZ

10 a witness herein, having been first duly sworn, was
11 examined and testified as follows:

12 EXAMINATION

13 BY MR. PINELLI:

14 Q Mr. Lopez, what is your current rank with
15 the Fire Department?

16 A Firefighter EMT.

17 Q What was your last assignment before you
18 went on layup?

19 A My last assignment was at headquarters at
20 the Division of Safety.

21 Q Prior to today's date, did you receive a
22 copy of the exhibits from the Board staff?

23 A I did. I am looking at it right now.

24 Q Did you have the opportunity to review

1 them?

2 A I did.

3 Q Do you have any objection to their
4 admission into the record?

5 A No, I do not. I lived through it. I
6 remember it. I do not deny anything in these
7 pages.

8 MR. PINELLI: Very good, thank you.

9 Mr. Chairman, I move for admission of
10 Board Exhibits 1 through 11 without objection from
11 the applicant.

12 CHAIRMAN FORTUNA: Admitted without
13 objection.

14 (Board Exhibits 1 through 11 were
15 admitted into evidence.)

16 BY MR. PINELLI:

17 Q Sir, you entered service with the Fire
18 Department in 2005?

19 A Correct.

20 Q You are currently experiencing some
21 injuries that are preventing you from returning to
22 work; is that correct?

23 A That is correct.

24 Q Just briefly describe, if you would, for

1 the members of the Board, what your current
2 condition is with respect to any limitations and so
3 forth that you are experiencing.

4 A I have a fracture of the fifth metatarsal
5 of the left foot also known as a Jones fracture.

6 Q Did you develop that condition since you
7 have been in service with the Fire Department?

8 A Well, yes. It is a fracture. It came
9 about earlier this year sometime. It is a stress
10 fracture.

11 In the discussion with Dr. Peters, I
12 didn't really feel the actual injury occur so I
13 can't pinpoint a date. But the problem is at the
14 present time it is preventing me from working.

15 Q Are you undergoing treatment for it?

16 A Yes, I am. Actually, I was in a boot for
17 a while. I have been removed from the boot as the
18 swelling has subsided. I went under swelling
19 treatment, that includes wrapping it, wrap therapy,
20 at Palos Hospital, twice a week, and I have seen my
21 doctor frequently. I have an appointment with Dr.
22 Jim Geiger on Friday and I have another appointment
23 with the orthopedic doctor, on I believe it is
24 November 8th, Dr. Brian DeFrino.

1 Q Since you went on layup for this injury,
2 have you engaged in any activities by which you
3 earn income?

4 A No, I have not.

5 Q Have you engaged in any sporting
6 activities?

7 A No, I have not.

8 MR. PINELLI: Thank you. That is all the
9 questions I have.

10 CHAIRMAN FORTUNA: Trustees, any
11 questions?

12 Hearing none, Vince.

13 MR. PINELLI: Thank you. I would call
14 Dr. Peters.

15 (Witness previously sworn.)

16 MICHAEL I. PETERS, M.D.

17 a witness herein, having been first duly sworn, was
18 examined and testified as follows:

19 EXAMINATION

20 BY MR. PINELLI:

21 Q Sir, please state your name.

22 A Michael I. Peters.

23 Q You're a physician; is that correct?

24 A Yes.

1 Q A copy of your qualifications are
2 attached to the Board Exhibits?

3 A Yes, it is.

4 Q You perform a function as a consultant to
5 this fund?

6 A Yes, I do.

7 Q In that capacity, do you review medical
8 records, examine applicants and report to the
9 Board?

10 A Yes.

11 Q And in some instances you can't examine
12 them due to the pandemic so do you interview them
13 instead?

14 A Yes.

15 Q Did you follow that procedure with
16 reflect to Mr. Lopez?

17 A Yes, I did.

18 Q Did you file a written report with the
19 Board that is marked as Board Exhibit Number 2?

20 A Yes.

21 Q Was the information that he provided to
22 you consistent with the records that you reviewed?

23 A Yes, it was.

24 Q Can you briefly summarize for us the

1 current condition with respect to his left foot?

2 A Firefighter Lopez, because of
3 long-standing diabetes, has peripheral vascular
4 disease as well as neuropathy.

5 Because of the vascular disease, he has
6 had amputations of his right great toe, the first
7 toe, his left fourth toe which had a chronic ulcer
8 requiring a plastic surgeon to put a skin flap. It
9 eventually did heal after he had an angioplasty of
10 an artery in his left leg.

11 From a neuropathy standpoint, the normal
12 protective reflexes of when you walk to keep you
13 from rolling a foot or adjusting your foot on an
14 uneven surface doesn't exist anymore for him.
15 Because of that, he had a total of three different
16 fractures on his foot. Two metatarsal fractures in
17 the middle and then a more serious Jones fracture,
18 which is the fracture of the fifth metatarsal. It
19 normally requires surgery because it doesn't heal
20 otherwise. Because of his other coexisting
21 problems with his diabetes, the vascular disease,
22 the neuropathy, the surgery wasn't performed so
23 that is an ongoing recovery for him.

24 Q Based upon those conditions, would he be

1 able to perform his duties in the Fire Department?

2 A No, he wouldn't.

3 MR. PINELLI: Thank you, doctor, that is
4 all the questions I have.

5 CHAIRMAN FORTUNA: Trustees, any
6 questions for the doctor?

7 MEMBER MCPHILLIPS: No questions.

8 CHAIRMAN FORTUNA: Hearing no questions,
9 Vince.

10 MR. PINELLI: Thank you. Mr. Lopez, that
11 concludes the evidence in this matter; is that
12 correct?

13 MR. LOPEZ: Yes. I was just curious
14 about a question for the doctor. Obviously, at
15 this point in time, you know, I am precluded from
16 working. But if as time goes on and the healing of
17 the foot, you know, becomes complete, what are my
18 options then would you say?

19 MR. PINELLI: That is really a
20 determination for the Fire Department, Mr. Lopez.

21 MR. LOPEZ: Okay.

22 MR. PINELLI: If your foot gets to the
23 point where you feel that you are ready to return
24 to work, then you can reach out to the Fire

1 Department.

2 MR. LOPEZ: To make an attempt to --
3 sorry to cut you off. At least an attempt,
4 depending on how my doctor's feel and how I feel.
5 I am just curious. Thank you for your answer. I
6 appreciate it.

7 MR. PINELLI: Nothing further.

8 MEMBER MURPHY: Mr. President, I'd like
9 to make a motion to grant the Ordinary Disability
10 benefits requested by Firefighter EMT Lopez.

11 MEMBER MCPHILLIPS: Second.

12 CHAIRMAN FORTUNA: There is a motion to
13 grant by Trustee Murphy. Seconded by Trustee
14 McPhillips.

15 Trustee Murphy.

16 MEMBER MURPHY: Yes.

17 CHAIRMAN FORTUNA: Trustee Sheridan.

18 MEMBER SHERIDAN: Yes.

19 CHAIRMAN FORTUNA: Trustee Soni.

20 MEMBER SONI: Yes.

21 CHAIRMAN FORTUNA: Trustee McPhillips.

22 MEMBER MCPHILLIPS: Yes.

23 CHAIRMAN FORTUNA: Trustee Tebbens.

24 MEMBER TEBBENS: Yes.

1 CHAIRMAN FORTUNA: Trustee Valencia.

2 MEMBER VALENCIA: Yes.

3 CHAIRMAN FORTUNA: And I am a yes.

4 Motion carries.

5 MEMBER MURPHY: Mr. President, I would
6 like to make a motion for reexams consistent with
7 the Board's policy.

8 MEMBER SHERIDAN: Second.

9 CHAIRMAN FORTUNA: Motion for reexam by
10 Trustee Murphy. Seconded by Trustee Sheridan.

11 Trustee Murphy.

12 MEMBER MURPHY: Yes.

13 CHAIRMAN FORTUNA: Trustee Sheridan.

14 MEMBER SHERIDAN: Yes.

15 CHAIRMAN FORTUNA: Trustee Soni.

16 MEMBER SONI: Yes.

17 CHAIRMAN FORTUNA: Trustee McPhillips.

18 MEMBER MCPHILLIPS: Yes.

19 CHAIRMAN FORTUNA: Trustee Tebbens.

20 MEMBER TEBBENS: Yes.

21 CHAIRMAN FORTUNA: Trustee Valencia.

22 MEMBER VALENCIA: Yes.

23 CHAIRMAN FORTUNA: And I am a yes.

24 Motion carries.

1 MEMBER MURPHY: Counsel has previously
2 sent around proposed Findings of Fact and
3 Conclusions of Law.

4 I would like to make a motion to adopt
5 the Findings of Fact and the Conclusions of Law in
6 this matter.

7 MEMBER TEBBENS: Second.

8 CHAIRMAN FORTUNA: Motion to adopt the
9 Findings of Fact by Trustee Murphy. Seconded by
10 Trustee Tebbens.

11 Mr. Lopez, can you hear me?

12 MR. LOPEZ: Yes, I can.

13 CHAIRMAN FORTUNA: Based on the Findings
14 of Fact and Conclusions of Law made by the
15 Trustees, the Trustees have voted to grant you the
16 benefit you have requested.

17 You will be notified by mail of the
18 Findings of Fact and the Board's decision.

19 Thank you and good luck to you. Come
20 back.

21 MR. LOPEZ: Thank you, very much.

22 MEMBER TEBBENS: I just want to address
23 something. I wanted to wait until after all the
24 votes.

1 Can legal counsel advise Firefighter
2 Lopez, if you frame the question, pending the
3 approval of the Fire Department, how would this
4 Board view his status of pensionable service
5 credit?

6 Firefighter Lopez, is that something you
7 want to know?

8 MR. LOPEZ: Yes, it is for sure.

9 MEMBER TEBBENS: Okay. If counsel can
10 answer that question, please.

11 MS. BURNS: I don't know if you are
12 directing that question to Vince or to me? Is your
13 question, Trustee Tebbens, whether or not Mr. Lopez
14 will get service credit for the period of time that
15 he is on Ordinary Disability?

16 MEMBER TEBBENS: Well, my question to
17 counsel, or I think what Firefighter Lopez was
18 wondering and I confirmed that with him, pending
19 the approval of the Department to put him back in
20 active status, how would that affect his
21 relationship with the Pension Fund as far as
22 service credits and pensionable credit?

23 MS. BURNS: I am not sure, again, that I
24 understand that question. But if I understand it

1 correctly, the Board has just granted Firefighter
2 Lopez an Ordinary Disability benefit. He will be
3 able to receive that benefit based on his years of
4 service, which I believe he's got 16, 17 years of
5 service, so he will be entitled to up to five years
6 of service credit if he remains disable, correct,
7 Vince?

8 If at any point in time he goes back to
9 work at the Fire Department, obviously, he will
10 then start getting service credit from the Fire
11 Department. He gets service credit while he is on
12 Ordinary Disability.

13 When that expires, if he has not gone
14 back to work with the Fire Department, and the Fire
15 Department controls the decision as to whether or
16 not Firefighter Lopez is fit for duty, in other
17 words the Fire Department decides not to put him
18 back, then he would be in a no service status.

19 MEMBER TEBBENS: Mary Pat, that is
20 exactly what I wanted you to inform him of.

21 MS. BURNS: Mr. Lopez, always feel free
22 to call the Fund, if we can be of any help to
23 answer any question that you have.

24 MR. LOPEZ: Absolutely. Thank you, very

1 much. That clears up the answers I was looking
2 for.

3 Thank you, Mr. Tebbens. I appreciate
4 stepping in on my behalf to clear up that question
5 for me.

6 MEMBER TEBBENS: Not a problem. Always
7 welcome.

8 MEMBER MCPHILLIPS: Good luck, Mike.

9 MR. LOPEZ: Thank you, very much. Have a
10 good day to the rest of you ladies and gentlemen.

11 MEMBER MURPHY: Moving on to 5, I would
12 like to make a motion to approve the Board
13 physician's recommendations for reviews.

14 MEMBER SONI: Second.

15 CHAIRMAN FORTUNA: There is a motion by
16 Trustee Murphy. Seconded by Trustee Soni.

17 Trustee Murphy.

18 MEMBER MURPHY: Yes.

19 CHAIRMAN FORTUNA: Trustee Sheridan.

20 MEMBER SHERIDAN: Yes.

21 CHAIRMAN FORTUNA: Trustee Soni.

22 MEMBER SONI: Yes.

23 CHAIRMAN FORTUNA: Trustee McPhillips.

24 MEMBER MCPHILLIPS: Yes.

1 CHAIRMAN FORTUNA: Trustee Tebbens.

2 MEMBER TEBBENS: Yes.

3 CHAIRMAN FORTUNA: Trustee Valencia.

4 MEMBER VALENCIA: Yes.

5 CHAIRMAN FORTUNA: And I am a yes.

6 Motion carries.

7 MEMBER MURPHY: Mr. President, on the
8 Investment portion, I would like to turn this over
9 to Lorna.

10 MS. SCOTT: My plan today is to give all
11 of the investment time on the agenda to Brady to
12 discuss the preliminary results of the Asset
13 Liability Study.

14 I am so pleased that there is enough time
15 on this month's agenda so the whole board can be
16 involved in this discussion.

17 The Asset Liability Study generally
18 happens every five years. So every five years we
19 spend a little extra time on investments. It is a
20 really important discussion as we review and set
21 the portfolio for the years to come.

22 As Brady is sharing his screen, I will
23 just have a few comments on my report. My report
24 is in BoardPac for your review. These are the

1 usual charts related to performance and
2 attribution. As well as the quarterly reports on
3 private market cash flows and security lending.

4 If there is any questions on my report,
5 please reach out.

6 Just to comment on performance,
7 generally, September was rough. All of the asset
8 classes were down, except for commodities. There
9 is a lot of uncertainty in the market around
10 inflation, supply chain, China.

11 In September, the Fund was down 2.4
12 percent and that was slightly behind the benchmark
13 which was down 2.2.

14 Year-to-date the returns remain strong so
15 the Fund is up 10.5 percent year-to-date and it is
16 outperforming the benchmark which is up 9.6.

17 That is my report in a nutshell and now I
18 will turn it over to Brady.

19 MR. O'CONNELL: Thank you, Lorna.

20 I am joined today by my colleague Gary
21 Chang, who is in our Capital Markets Research
22 Group.

23 The Board has seen specialists from
24 Callan from time to time as we do some of these

1 projects that require a little more specialty
2 expertise.

3 So Gary is in that group. That group
4 does between 20 and 30 Asset Liability Studies a
5 year.

6 I will take the next 20 minutes to walk
7 the Board through a summary of that report. I may
8 ask Gary to comment, if questions come up through
9 the course of that.

10 I did want to begin the presentation by
11 just reinforcing a point that Lorna made, which is
12 the importance of asset allocation.

13 So of all the investment related
14 decisions that this Board makes, determining the
15 asset allocation setting, the long-term asset
16 strategy, is the most important decision that you
17 will make.

18 So you will note in the timeline that
19 today we're presenting you with initial findings
20 and considerations. We will have the opportunity
21 to review and discuss those over the coming months.
22 Early next year, we will ask the Board to
23 officially adopt a new asset allocation strategy.
24 We will incorporate that into the Board's Statement

1 of Investment Policy.

2 It is a very deliberate process that is
3 going to require some time and that time simply
4 reflects the importance of which we place on this
5 decision and the opportunities that we want to give
6 the Board to ask questions about this important
7 decision.

8 So over the course of the next several
9 minutes, we are going to talk about kind of two key
10 decision points that I am going to ask the Board to
11 consider over these next months.

12 How much investment risk do we want to
13 take? So we will look at how much risk we are
14 taking now. We will look at how other public
15 pension plans allocate their assets and we'll talk
16 about how much assets the Board is comfortable with
17 placing in illiquid investment strategies.

18 Right now the asset allocation strategy
19 has the bulk of our assets in things that we can
20 buy and sell on a daily basis like public stocks
21 and bonds.

22 In 2017, we began the process of further
23 diversifying the portfolio by adding to less liquid
24 investment strategies like private equity and real

1 estate.

2 We have been able to ease into those
3 allocations over the last several years as we have
4 gotten comfort and transparency regarding the
5 Fund's contributions. That is another critical
6 element that we will walk through in this Asset
7 Liability Study is evaluating the contributions
8 that are coming into the plan now and what that
9 means for the financial health of the plan going
10 forward.

11 But kind of a spoiler alert, we do think,
12 because the cash flow situation has improved
13 considerably since we did this in 2015, that there
14 is the possibility of adding more to less liquid
15 assets and we think those asset classes have risk
16 and return benefits that will improve the overall
17 FABF portfolio.

18 With that introduction, let me just walk
19 through a couple of these slides and the schematic
20 is really met to illustrate what we are doing at a
21 high level with the Asset Liability Study.

22 Most of the time when you hear us talking
23 about investments, we're looking at the investment
24 portfolio on its own separate from the liabilities,

1 separate from the funding mechanism.

2 When we do these reports, what we try to
3 do is incorporate employee and employer
4 contributions, the current benefit levels. So we
5 get information from Segal, who is your actuary, to
6 estimate current liabilities and model those into
7 the future.

8 As Lorna mentioned, this is done
9 typically on a five year basis. Sometimes we will
10 recommend clients do it more frequently if there is
11 a major change in any of these aspects. Either the
12 funding policy or the benefit policy.

13 This is really why we do an Asset
14 Liability Study to make this asset allocation
15 decision but to do so with a thorough understanding
16 of how cash comes into the plan and how it's being
17 spent on benefits.

18 As I mentioned earlier, we did get
19 information from Segal. As part of this process,
20 we cooperate with your actuary to get the liability
21 data.

22 If you look at the upper right-hand
23 corner, this really has the critical information
24 for the Board at this time at a high level.

1 For public pension plans, we often talk
2 about a number called the funded status, which is
3 the ratio of the assets that we have on-hand to pay
4 benefits relative to the liabilities or a current
5 estimate of the benefits that we need to pay into
6 the future.

7 Right now, including receivables, our
8 asset market value is about 1.3 billion. We owe
9 the participants in the plan an estimated 6.6
10 billion.

11 So that means we have got about 20 cents
12 on the dollar or a funded ratio of 20 percent.

13 I think when we did this in 2017 it was a
14 little bit lower. It was somewhere around 17 or 18
15 percent. And as we will show on the coming slides,
16 the contributions that are coming into the plan
17 will improve the funded status but it is a very
18 gradual process.

19 We shouldn't expect to see huge moves in
20 the funded status of the plan without just this
21 gradual improvement in contribution levels and
22 having shifted to kind of a net positive cash flow
23 position we need some time for that to accrue to
24 the plan to see an improvement in funded status so

1 as our assets on-hand catch up with the liabilities
2 that we need to pay.

3 This slide illustrates that phenomenon.
4 The red or orange-ish line with dots is our
5 projection of the plan's funded status over the
6 next 20 years.

7 The blue line, the blue bars, represent
8 the market value of assets and then we project a
9 growth in the actuarial determined liability.

10 So that funded status again is that ratio
11 of assets to liabilities. As you will see here,
12 there is a very gradual funded status improvement.
13 Based on Callan's numbers, we think we are going to
14 improve to about 43 percent funded in the next 20
15 years.

16 So from a 20 percent funded status
17 perspective, that is a very favorable move, more
18 than doubling our funded status.

19 At the end of the next 20 years, that
20 still means that we have only got 43 cents for
21 every dollar of benefits that we owe.

22 As you will hear throughout the
23 presentation, the critical component of this plan's
24 health improving is these contributions from the

1 City and to a lesser extent the employees
2 continuing to come in on a regular basis.

3 As we note here at the bottom of Page 5,
4 the contribution level is determined to pay down
5 the unfunded liability and pay for current benefits
6 to reach a point of 90 percent funded by year end
7 2055.

8 It is kind of a long road that we're
9 going to be on to get us to what is hopefully 90
10 percent funded on or around 2055. The improvements
11 that we'll see will be very gradual over the coming
12 decades.

13 I will pause there for a second and see
14 if there are any questions.

15 MEMBER MCPHILLIPS: No questions. Good
16 job, Brady.

17 MR. O'CONNELL: This is the next slide
18 that I think is pretty critical. Mostly to
19 determining that second question that I am going to
20 ask the Board to consider, which is how much we can
21 put in less liquid investments. So higher
22 returning, less liquid investments, can help us
23 achieve a better return for the amount of risk.

24 What this chart shows at the end of the

1 day is how much net cash we are paying out. And
2 the overall takeaway is it does increase over time
3 so the cash outflow is negative so that means we're
4 getting money in now. We have got a positive cash
5 flow.

6 Most pension plans are in a negative cash
7 flow situation.

8 We will move again back into a negative
9 cash flow situation but it never gets to the point
10 where it is huge. Based on this illustration, we
11 think the plan does have the ability to
12 incrementally increase the amount of illiquid
13 investments that you can make.

14 At the end of the slide, we will show you
15 our preliminary recommendation. But to take the
16 anticipation out of it, we do think we can add
17 incrementally to new asset classes that should
18 improve expected returns.

19 Here's where we are now on Page 7, the
20 current asset allocation strategy. We are about 60
21 percent in publicly traded equities in both U.S.
22 and globally, non-U.S. and emerging markets, 20
23 percent in fixed income and 20 percent in
24 alternatives, which we have defined fairly broadly

1 as kind of real assets, liquid diversifying assets
2 and private equities.

3 How does that compare to other public
4 pension plans? We try to illustrate that here on
5 Page 8.

6 Under the column heading "FABF Current
7 Target", this is what is in our Investment Policy
8 Statement. We compared that to the average public
9 pension plan just to give the trustees an idea of
10 what others are doing.

11 Your financial conditions are unique and
12 we want to make your asset allocation decision
13 based on your conditions alone. But I think it's
14 important for public fund boards and fiduciaries to
15 always understand what other public plans are doing
16 and have a discussion about why they may be doing
17 that.

18 A couple of high level takeaways here.
19 You have had more in public equities. You have had
20 more than the average fund in U.S. and global
21 ex-U.S. equities. You have had less in fixed
22 income and less in alternatives.

23 Now over the past ten years, this
24 strategy has been very beneficial to the Fund. So

1 U.S. equities in particular have performed well.
2 Fixed income has struggled to keep up with some of
3 these investments. So the way you have been
4 allocated for the past ten years away from illiquid
5 assets has really been a tailwind to the
6 performance of the plan. But the question we're
7 dealing with today is how do we think we are going
8 to perform over the coming 10 and 20 years.

9 We really do think it's important to
10 reevaluate how much is in public equities and fixed
11 income and alternatives and really start to make
12 more use of these tools that other public pension
13 plans have been able to invest in because they had
14 more certainty about their contributions or their
15 funded status was higher so they were able to put
16 more assets into illiquid investments.

17 We have touched a little bit on the 2017
18 study so this is really a continuation of what we
19 started then, which is a process of further
20 diversifying the asset allocation strategy of the
21 plan, reducing the amount in public equities,
22 increasing our exposure to real assets or assets
23 that are sensitive to inflation.

24 And, as you will hear a little bit later,

1 we also over the past couple months discussed a
2 couple new asset classes that we will ask the Board
3 to think about in more detail; private credit and
4 infrastructure.

5 The concept in 2021 is really to build on
6 what we did in 2017, which is improving the
7 diversification of the plan.

8 We really do think you're in a position
9 to do that now given the certainty that we have in
10 2021 about contribution levels that we didn't have
11 in 2016 and 2017 when we were making that decision
12 back then.

13 In order to make these projections,
14 Callan uses a set of assumptions about what
15 different asset classes will return in the coming
16 ten years.

17 There is a paper that we recently
18 distributed to our clients that talks about how,
19 despite having really one of the best calendar
20 years in fiscal year asset returns in 35 or 40
21 years, most public plans are expecting modest
22 returns going forward and that is our message for
23 you as well.

24 We do think it is going to be hard to

1 meet your actuarial discount rate over the next ten
2 years. We do think over a longer time horizon,
3 maybe 20 or 30 years, you will have no problem in
4 exceeding that 6.75.

5 Our message for clients today is the next
6 ten years is going to be modest because we are
7 starting at a position of very low interest rates.

8 So you can see our assumption for core
9 fixed income for the next ten years is a return of
10 1.75 so very modest.

11 We have had a very good run on equities.
12 If we get a lot of strong performance, it really
13 means it is going to be harder to get excess
14 returns going forward. So we have more modest
15 expectations for many of the publicly traded asset
16 classes, that is one of the factors playing into us
17 recommending the Board consider new asset classes
18 like we have highlighted here in yellow; private
19 infrastructure and private credit.

20 This chart is a little technical but when
21 we do this exercise we try to see if we designed a
22 portfolio that is your current asset allocation
23 strategy that is efficient. Meaning that for a
24 given level of risk it gets us the highest possible

1 expected return.

2 We can measure that based on the yellow
3 dot being on the blue line. This blue line is
4 really a horizon. You can't move above it. You
5 can only be below it. If you are below it, it
6 means that you could shift your asset allocation,
7 your mix between different asset classes, to
8 achieve a higher return or a lower level of risk.

9 But what I want the Board to take away
10 here is that we have got an efficient mix. It
11 shouldn't surprise anyone. It wasn't a surprise to
12 us. We put a lot of time and effort in designing
13 this mix. It was using Callan's assumptions. This
14 isn't a huge surprise.

15 But we are taking a level of risk that's
16 very consistent with the triangle here that is
17 labeled 4. This is a hypothetical portfolio and
18 we're pretty much spot on it. This gets to the
19 first question of how much risk do we want to take.

20 We're recommending you continue to take
21 the same amount of risk that you have been taking
22 so here we show a lot of details. Maybe just look
23 to the bottom of the table that says Mix
24 Characteristics.

1 Your current standard deviation or the
2 risk estimated in your asset allocation is about
3 13.28. That Mix 4 has a risk level of 13.27.

4 You could increase that risk level to try
5 to increase your expected return but that would
6 require us to reduce the amount that we have
7 allocated to fixed income, which as we saw in the
8 first quarter of 2020, and another market crisis
9 can be an anchor to windward.

10 So the balance we're trying to strike is
11 how aggressive do we want to be without the
12 possibility of creating losses, painful losses,
13 when risky assets pull back.

14 We do know that risky assets is a bumpy
15 ride. So 2020 was a good example. The quarter
16 started out with a drop in the month of March of
17 around 30 percent and ever since then it's just
18 been roaring back.

19 As Lorna said, we did have a slight give
20 up in September but it is really hard to predict.
21 About seven out of ten years the S&P 500 has had a
22 positive return.

23 When we think about how much we put in
24 fixed income, that is really a measure of the

1 amount of safety assets that we have in the
2 portfolio. We have been operating with about 20
3 percent. Going more conservative to 25 percent.
4 Kind of makes it harder to justify that expected
5 return that we have and we would have to lower the
6 return that we expect from these portfolios.

7 So, in general, we think the amount of
8 risk that you have been taking is good. We
9 recommend that you continue to take a risk level
10 that is around where you currently are and where
11 this Mix 4 is.

12 Let me pause there for a second because
13 that is one of the big kind of preliminary
14 recommendations from today.

15 CHAIRMAN FORTUNA: Any questions?

16 All right. None.

17 MR. O'CONNELL: I will wrap it up in the
18 next couple of minutes here.

19 The second question is do we want to do
20 more in illiquid investments and in particular
21 private credit and infrastructure.

22 So I think this discussion about these
23 two asset categories began in March of 2020, or
24 maybe it was April, where we talked about deflation

1 and now the question of the day is really is there
2 going to be sustained inflation. Both of these
3 asset classes have kind of inflation protection
4 built into them. These are asset classes the Board
5 hasn't used in the past that some of your peer
6 plans do. With bond yields being very low, private
7 credit is now more an attractive investment
8 opportunity.

9 We have modeled scenarios that show what
10 the expected return would be if we add these new
11 tools to the portfolio.

12 There is a lot of numbers on this page
13 but what I would like to do is maybe compare that
14 Mix 4 to that Mix 4-14. So this is at the end of
15 the day the portfolio that I think you should
16 consider, which is adding a modest 3 percent
17 allocation, a new asset allocation to both
18 infrastructure and private credit. Getting rid of
19 the commodity allocation, that is currently 2
20 percent, and shifting the 2 percent allocation that
21 is currently earmarked for TIPS.

22 There is also a reduction in publicly
23 traded stocks and bonds to fund some of those new
24 investments.

1 What this does, adding these new asset
2 classes, effectively shifts this efficient frontier
3 up. It allows us to experience a higher expected
4 return, again based on our forward looking
5 assumptions, at the same level of risk.

6 So with these scenarios, we have modeled
7 how can we improve the plan's expected return
8 without increasing risk.

9 Here we are measuring risk from a
10 traditional standpoint, which is the standard
11 deviation of the bounciness of return.

12 What we don't measure on this chart is
13 the concept of illiquidity. Illiquidity becomes a
14 problem when you have to sell assets in a short
15 period of time.

16 In all of these scenarios, you would
17 still have a large amount invested in equities and
18 fixed income.

19 Based on those cash flow projections we
20 touched on a few minutes ago, we don't think you're
21 going to need to sell less liquid investments but
22 that is the one factor that makes us cautious about
23 approaching some of these less liquid asset
24 classes.

1 Now just to wrap it up. At the end of
2 the day, we're 20 percent funded. The path to
3 improving that is going to be driven by the
4 contributions.

5 We have seen those. The net cash flow
6 flip from one that was consistently negative to
7 positive and it will be that way over the next
8 several years.

9 Over 20 years, we do expect that to shift
10 us to about 43 percent funded status. Over the
11 next ten years, we are going to get halfway there
12 so about 32 percent.

13 At the end of the day, when you have 20
14 cents on the dollar, there is not much you can do
15 just with the asset portfolio to fix that problem
16 so we need contributions. But when you have 20
17 cents for every dollar of liabilities, you really
18 need to get a return that is five times the asset
19 size to keep up with the change in liabilities.

20 So we are kind of coming from behind. We
21 need to rely primarily on these contributions. We
22 can still do an excellent job in investments to try
23 to help improve that funded status further. That
24 is a discussion we had in 2017.

1 This cash flow is critical to the plan's
2 financial health improving but we still want to do
3 as good a job as possible on the investment side.

4 At this point, we are open to feedback,
5 questions, initial reactions to these
6 recommendations, and open to having further
7 discussions in the coming months before making a
8 final recommendation to the Board.

9 Here, again, on Slide 17 is the proposed
10 mix relative to the current policy. And that Mix
11 4-14, it says "both" underneath, that is a scenario
12 that involves, again, allocating to these new asset
13 classes that we spent a little time on;
14 infrastructure and private credit.

15 Again, as you consider these, these asset
16 classes take some time to get exposure to. They
17 would be long-term investments. I think five years
18 from now, depending on the experience over the next
19 five years, we would reevaluate whether or not we
20 wanted to add to that further or reduce that.

21 These decisions are to make initial
22 allocations aren't irrevocable. Investing in these
23 things are kind of hard to undo immediately. But
24 part of the goal is to when we add a new asset

1 class is to make an incremental change and then see
2 how it goes and build on that further if it is
3 successful.

4 MEMBER VALENCIA: On the last slide,
5 we're looking at, based on the analysis, our fund
6 would be funded at 32 percent in 2030 under this
7 current Investment Policy?

8 MR. O'CONNELL: That is correct. And
9 based on the current contributions and projected
10 contributions.

11 MEMBER VALENCIA: Okay, thank you. When
12 I started, it was 18 percent I think.

13 MR. O'CONNELL: That sounds right. It is
14 going in the right direction but the change is
15 going to be small and gradual on a year-to-year
16 basis.

17 MEMBER VALENCIA: Thank you.

18 CHAIRMAN FORTUNA: Any questions for
19 Brady?

20 MEMBER MCPHILLIPS: No. Brady, I thought
21 that was a fantastic presentation. Very nice job.

22 MR. O'CONNELL: Thank you.

23 MS. SCOTT: This was the initial
24 introduction and the plan is to possibly have an

1 Investment Committee meeting at the end of November
2 to kind of do a deeper dive and give Trustees time
3 to think about what we are planning on doing and
4 then answer any additional questions on this new
5 asset allocation at the end of November.

6 MEMBER VALENCIA: You are expecting a
7 vote at the next meeting in November or in
8 December?

9 MS. SCOTT: I believe the November agenda
10 will be very full. The short answer is probably in
11 December.

12 MEMBER VALENCIA: Okay. We will have
13 about two months, a month and a half, to review
14 this?

15 MS. SCOTT: Correct.

16 MEMBER VALENCIA: Thank you.

17 CHAIRMAN FORTUNA: Trustees, any
18 questions?

19 Lorna, thank you.

20 MS. SCOTT: One last thing, Mr.
21 President, that covers the investment portion but I
22 did want to give Jackie a chance to talk about the
23 checking account. She wants to provide the
24 Trustees on Chase.

1 CHAIRMAN FORTUNA: Please, do.

2 MS. VLAHOS: This should be pretty quick.
3 I know you have had a pretty long meeting.

4 Basically, as of October, our balance as
5 of October 14th is approximately \$94.2 million. We
6 are expecting one more salary contribution of \$1.8
7 million. Bringing us to available cash of \$96
8 million. After our October benefit payments and
9 our October bills, we look at expenditures of
10 approximately \$34.4 million. Leaving us an overage
11 of \$61.6 million at the end of October.

12 Do you want to go to the next page which
13 is the cash flows? Kind of like we discussed last
14 month, we are kind of anticipating whether or not
15 we are going to be receiving tax receipts and we
16 have seen a large portion of that coming in.

17 Currently, as of October to the end of
18 year, we originally had it was \$371 million due to
19 us in tax receipts from the City.

20 We have a remainder, if you look on the
21 first column, for the end of year of about \$17
22 million we're still anticipating. And then with
23 that being said, if we get the tax receipts like
24 we're anticipating, if you look all the way over to

1 the right, we have the \$94 million after our
2 benefit payments and our administrative costs, we
3 are going to be at the \$61.6 million. And it
4 should carry us with the additional receipts
5 through the end of the year with no drawdowns.

6 Just because due to timing, a lot of
7 times in January, we don't see any tax receipts or
8 it is very small, we might have to do a small
9 drawdown in January. But, hopefully, as long as
10 things come in as they have in the past, we should
11 have no drawdowns for the remainder of 2022.

12 Are there any questions?

13 CHAIRMAN FORTUNA: Questions?

14 No questions, Jackie. Thank you.

15 MEMBER SONI: Looks great. Thanks,
16 Jackie.

17 MS. SCOTT: Now we are done.

18 MEMBER MURPHY: Moving on to 7,
19 Administrative Expenses.

20 MEMBER SONI: I do have to leave the
21 meeting. I apologize. Did you need anything from
22 me?

23 CHAIRMAN FORTUNA: No, you're good.
24 Thank you.

1 MEMBER SONI: Thanks, everyone. Have a
2 great week.

3 MEMBER MURPHY: I'd like to make a motion
4 to approve the Administrative Expenses as they have
5 been presented.

6 MEMBER MCPHILLIPS: Second.

7 CHAIRMAN FORTUNA: There is a motion by
8 Trustee Murphy. Seconded by Trustee McPhillips.
9 Trustee Murphy.

10 MEMBER MURPHY: Yes.

11 CHAIRMAN FORTUNA: Trustee Sheridan.

12 MEMBER SHERIDAN: Yes.

13 CHAIRMAN FORTUNA: Trustee McPhillips.

14 MEMBER MCPHILLIPS: Yes.

15 CHAIRMAN FORTUNA: Trustee Tebbens.

16 MEMBER TEBBENS: Yes.

17 CHAIRMAN FORTUNA: Trustee Valencia.

18 MEMBER VALENCIA: Yes.

19 CHAIRMAN FORTUNA: And I am a yes.

20 Motion carries.

21 MEMBER MURPHY: Moving on to 8, I'd like
22 Kelly to present his Executive Director's Report.

23 MR. KELLER: First off, great to see
24 everyone as always.

1 One and two, just to pass along, the
2 Governor did extend the Declaration of Disaster
3 through November 15th. Our meeting falls right
4 after that but based on our prior experience, it
5 looks like we will -- and the President has agreed,
6 we will look at a virtual format in November. That
7 gives everybody a chance to look at their
8 calendars, if there is an opportunity for them to
9 be here. If there is not going to be an
10 opportunity for you to be here, please let me know
11 so that we can make sure our quorum stays on the
12 date.

13 The other thing I want to do is a broad
14 category. I want to thank the staff. Things have
15 been a little hectic and they are going to get a
16 little bit more hectic as we move into the end of
17 the year. And the staff has done a great job under
18 these unusual circumstance to keep everything
19 moving along. They have done a great job so kudos
20 to them.

21 To conclude a little bit on Jackie's
22 comment on the banking. We did finalize our
23 arrangement in moving the accounts away from the
24 City in consolidation with Chase where we

1 individually manage the account as a FABF account.

2 We met with the GPM team earlier this
3 week and we have got that transition to happen
4 probably the first or second week of January as we
5 get through the payroll for the end of the year.
6 We are moving forward with that. That is a great
7 move on our part and I think it will help us get
8 control of the banking. Have more control over
9 that side of the business. Kudos to Jackie in
10 keeping that moving forward.

11 Into the meat of the report, I did put
12 the sexual harassment awareness and prevention
13 module as well as the IT security awareness module
14 into BoardPac this week.

15 We are moving into the end of the year.
16 Everybody needs to get their eight hours of
17 training in.

18 Lorna mentioned that there will be
19 another investment committee coming in November.
20 We have looked at those at about two to two and a
21 half hours of credit for each one.

22 So the folks going through the investment
23 committee meetings and complete this training
24 should be fine on the eight hours.

1 The folks that don't, you can reach out
2 to me, we want to make sure we can get training
3 arranged by the end of the year.

4 If all of you could, it is mandatory that
5 we have these certificates on file for both the
6 sexual harassment and prevention training as well
7 as the security awareness training. It is the last
8 page of the module. Fill it out, take a picture of
9 it and send it back to me and the Fund and we will
10 go ahead and make sure we have a record of that
11 being done.

12 Secondly, through our cyber renewal,
13 which you will see in November, we have initiated
14 several security enhancements that were I think
15 critical and important. I am glad we worked
16 through them. Kudos to Chris in that regard.

17 You will see as Trustees, those who use
18 the FABF email address and you access the FABF
19 email through Microsoft 365, there will be an
20 enhancement on Microsoft 365 that will require you
21 to go through a multifactor authentication. We are
22 going to roll that out after this meeting. It will
23 probably start next week.

24 As you see those emails come in, work

1 with Chris. It is not a complicated process but
2 you need to make sure you keep that code that you
3 get sent as a one time sign-in. That is your
4 unlock key if something should happen in the
5 future. I recognize there is a little bit of
6 frustration that we are going to impose at the
7 front end but it is very, very critical for us to
8 protect our email systems considering the integrity
9 of the data we move.

10 As part of that, we have encrypted our
11 terminal server with a dual multifactor
12 authentication and we have encrypted all of our
13 computers with a BitLocker.

14 We are really moving in a way to help us
15 protect the data of our members and to make sure
16 that we do not have any outside areas where someone
17 can get into our critical data server.

18 The next thing I want to move into is the
19 election. We are moving into an election count,
20 which would be October 26th, next week, at eight
21 a.m.

22 For those who are interested, we will be
23 doing that in this conference room. We will follow
24 the procedures to the letter. Those of you who

1 want to participate be here at eight a.m. to do
2 that.

3 We only received one request to send a
4 replacement ballot. We got that done last week so
5 it looks like the mailing went well and the request
6 for supplement ballots was almost nil. So far it
7 appears that everything is moving along as we had
8 planned so that is that.

9 Let's move on. I am bracing everyone for
10 a little bit of news. I think it is good news in
11 my world. We did have our employee healthcare
12 discussion with our outside provider. It looks
13 like when we're looking at budgeting for 2022 about
14 a 4.6 percent increase or about \$19,000 annual
15 increase in year-over-year coverage for our
16 employee team.

17 I think looking at industry standards and
18 in contact with our person who is coordinating on
19 our benefits, Kathy Rowe, we are actually quite a
20 bit below the national average. We use an age
21 based rating which has helped us in the long run.
22 I think as we look into November we're going to be
23 doing an open enrollment. We are going to be
24 looking for renewal on that, that will be on the

1 November 17th agenda.

2 I just wanted to say if you have
3 questions about it let me know because we do intend
4 to press on and expect to go with the plan as it is
5 proposed right now with the 4.6 percent increase.

6 If you want more data on that, let me
7 know. I will be happy to provide that.

8 The police settled the contract as you
9 are aware. There are some need to metro in that,
10 that will be flowing towards the end of the year.
11 Chris is aware of that. So is Michelle. We are
12 not completely aware what that means throughout the
13 role throughout our plan but we do know it is
14 coming so we're going to brace that and make sure
15 that gets implemented. You will know more about
16 that hopefully in December I think we should know
17 more and then we will institute that as we get the
18 verification.

19 That gets me through the broad items.
20 Next is Board approval for our 2022 board meetings.

21 As you can see from the list, this would
22 be our meetings. We are staying to our convention
23 of the third Wednesday of the month. That seems to
24 suit the other plans and our schedules as well.

1 This reflects what we anticipate for 2022
2 reflecting those third Wednesdays of each month.

3 CHAIRMAN FORTUNA: I would like all the
4 trustees to take a look at this before we take a
5 vote on it.

6 MEMBER VALENCIA: Just so you know, I
7 don't know, the Mayor has not set her City Council
8 meetings. They are on Wednesdays. Just know that
9 if they fall on the same Wednesday, I will have a
10 hard time making it or will only be able to be here
11 for the first hour before Council. I just wanted
12 to flag that, if we do Wednesdays.

13 CHAIRMAN FORTUNA: That is totally
14 understood and that is why I want everybody to take
15 a good hard look at this. If there is anything we
16 need to move early, it will make it a lot easier
17 for us and staff, if you can email that to
18 everyone.

19 MR. WELLER: Do you want to table this
20 vote?

21 MS. BURNS: We can just defer it. We
22 don't have to take a motion on it.

23 MR. WELLER: So the second piece of that
24 would be the holidays. We can wait on that as well

1 but these are the holidays. We are waiting for the
2 City of Chicago to finalize Juneteenth which right
3 now is not is showing up on their schedule as a
4 date. Whatever City of Chicago decides do with
5 that date, we will go ahead and address
6 accordingly. We moved it to the Monday
7 preemptively because Juneteenth falls on a Sunday.

8 This would be the holidays that would be
9 reflected based on last year's scheduling.

10 CHAIRMAN FORTUNA: Okay.

11 MS. BURNS: Do you want to make a motion
12 to adopt that?

13 MEMBER MURPHY: I make a motion on the
14 advice of Fund counsel.

15 MS. BURNS: Kelly has proposed the office
16 holiday schedule. He is deferring the board
17 meeting schedule. We can defer them both. I want
18 to make sure that is what you want.

19 MR. WELLER: We will put these on the
20 November agenda for final approval after everyone
21 has a chance to look at them.

22 MS. BURNS: We can coordinate it with the
23 City.

24 MR. WELLER: The last piece is we did get

1 requested from Blue Cross Blue Shield Illinois to
2 do a blind mailing. Everyone has had a chance to
3 see that. Our attorneys have reviewed it. It's
4 just essentially about retiree healthcare and some
5 of the options that Blue Cross is offering.

6 We reached out to Aetna. Aetna did not
7 respond at this point to use our Blind Mailing
8 Policy.

9 They have asked us to coordinate with the
10 printer. We have done that at this point in time.
11 Pending the Board's approval of the material, we
12 would ask for the approval of the Blind Mailing
13 Policy and to allow Blue Cross to move forward with
14 this piece of mailing that has been approved.

15 MEMBER MURPHY: Based on that
16 recommendation, I would like to make a motion to
17 approve the retiree healthcare blind mailing for
18 Blue Cross as presented.

19 MEMBER VALENCIA: Second.

20 CHAIRMAN FORTUNA: Motion by Trustee
21 Murphy. Seconded by Trustee Valencia.

22 Trustee Murphy.

23 MEMBER MURPHY: Yes.

24 CHAIRMAN FORTUNA: Trustee Sheridan.

1 MEMBER SHERIDAN: Yes.

2 CHAIRMAN FORTUNA: Trustee McPhillips.

3 MEMBER MCPHILLIPS: Yes.

4 CHAIRMAN FORTUNA: Trustee Tebbens.

5 MEMBER TEBBENS: Yes.

6 CHAIRMAN FORTUNA: Trustee Valencia.

7 MEMBER VALENCIA: Yes.

8 CHAIRMAN FORTUNA: And I am a yes.

9 Motion carries.

10 MR. WELLER: The next meeting is November
11 17th. Again, if anybody knows that they are not
12 able to attend, please let us know so we make sure
13 our quorum stays intact.

14 Thank you, very much.

15 CHAIRMAN FORTUNA: Thank you, Director
16 Kelly.

17 MEMBER MURPHY: Moving to 9, Legal
18 Update.

19 MS. BURNS: There is nothing to report
20 this month.

21 MEMBER MURPHY: New Business/Old
22 Business. Any new business or old business?

23 CHAIRMAN FORTUNA: Hearing none.

24 MEMBER MURPHY: I'd like to make a motion

1 to adjourn today's meeting.

2 MEMBER VALENCIA: Second.

3 CHAIRMAN FORTUNA: Motion to adjourn.

4 Seconded by Trustee Valencia. All in favor?

5 (Chorus of ayes.)

6 CHAIRMAN FORTUNA: Thank you, very much,
7 everyone.

8

9 (WHICH WERE ALL THE PROCEEDINGS

10 IN THE ABOVE-ENTITLED MEETING

11 AT THIS DATE AND TIME.)

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