(EXHIBIT "B")

This form completed and notarized, must be delivered to the Office of the Fund
no later than **October 17, 2023**.

STATE OF ILLINOIS)
) SS:
COUNTY OF COOK)

REQUEST FOR BALLOT AFFIDAVIT

I,_____, on my oath state and depose as follows:
Printed Name

1. I am eligible and desire to vote in the election to fill the office of **Active Firefighter Member Trustee** of the Retirement Board which becomes vacant on **December 1, 2023.**

2. (Check One) :

[ ] I did not receive a ballot or mailing envelope.

[ ] I spoiled my ballot and my spoiled ballot is enclosed herewith.

3. I currently reside at, and my replacement ballot should be mailed to:

_____

_____

_____ _____
Signature Date

As a voter you are responsible for having this form notarized before returning it to the Fund, or as an alternative, this form may be sent through the ID.me Adobe Forms verification process available on the Fund's website.

Subscribed and sworn to before me

this_____day of_____, 2023.

_____

NOTARY PUBLIC

I certify that_____, is eligible to vote in the election to fill the office of **Active Firefighter Member Trustee** of the Retirement Board which becomes vacant on **December 1, 2023**.

Election Committee Representative: _____