

GLOBAL SETTLEMENT CONSENT FORM

I, _____, have had a full opportunity to review the explanation of the Global Settlement provided to me with this form. I understand that the Global Settlement is embodied in a Charter Ordinance adopted by the Milwaukee Common Council and approved by the Circuit Court of Milwaukee County on November 3, 2000. I understand that this Consent Agreement gives me the opportunity to either consent *or* object to the Global Settlement.

If I consent to the Global Settlement by checking the "Consent" box below, I understand that I am agreeing to participate in a newly created "Combined Fund" within the Milwaukee Employees' Retirement System ("MERS"). I understand that this Combined Fund will provide improved benefits to its participants and fund structural changes that will benefit the City of Milwaukee ("City") and City Agencies participating in the MERS. I understand that I will be authorizing the City to proceed to implement the Global Settlement on my behalf, thereby waiving my right to object to the terms and conditions of the Global Settlement and my right to object to my participation in the Combined Fund.

If I object to the Global Settlement, by checking the "Object" box below, I understand that I am refusing to participate in the Combined Fund and will not receive the additional pension benefits provided under the Global Settlement, unless the Court orders objecting members to participate in the Global Settlement.

I understand that I am encouraged to consult with legal counsel or other advisors concerning the Global Settlement and the legal significance of consenting or objecting to the Global Settlement. I understand that by checking the appropriate box below, signing and returning this form to the MERS, I make this decision voluntarily in the exercise of my own free will, after being given an adequate opportunity to consider the issue.

Check only ONE box below:

CONSENT: I hereby consent to the Global Settlement and to my participation in the Combined Fund.

OBJECT: I hereby object to the Global Settlement and to my participation in the Combined Fund.

Dated this _____ day of _____, 200_. _____**

Participant's Signature

Participant's Pension I.D. Number

If you are executing this form on behalf of a participant, please sign on the line below, indicating your legal capacity **and submit a copy of the document(s) giving you such legal authority with this form.

Signature _____

Print Name: _____ Legal Capacity: _____